

**STATEMENT OF ECONOMIC INTERESTS**

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FAIR POLITICAL  
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**COVER PAGE**

Please type or print in ink.

NAME OF FILER (LAST) Mayfield, Cindee F. (FIRST) 15 FEB 17 PM 4:41 (MIDDLE)

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms) Mendocino County Superior Court Judge  
Division, Board, Department, District, if applicable \_\_\_\_\_ Your Position

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Family and Juvenile Advisory Committee Position: Member

**2. Jurisdiction of Office (Check at least one box)**

- State
- Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_
- County of \_\_\_\_\_
- City of \_\_\_\_\_
- Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

- Annual:** The period covered is January 1, 2014, through December 31, 2014.
- Leaving Office:** Date Left \_\_\_\_\_ (Check one)
- or-
- The period covered is 01 / 01 / 2014, through December 31, 2014.
- Assuming Office:** Date assumed \_\_\_\_\_
- Candidate:** Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- The period covered is January 1, 2014, through the date of leaving office.
- The period covered is \_\_\_\_\_, through the date of leaving office.

**4. Schedule Summary**

**Check applicable schedules or "None."** ► Total number of pages including this cover page: 1

- Schedule A-1 - Investments** – schedule attached
- Schedule A-2 - Investments** – schedule attached
- Schedule B - Real Property** – schedule attached
- Schedule C - Income, Loans, & Business Positions** – schedule attached
- Schedule D - Income – Gifts** – schedule attached
- Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-

**None - No reportable interests on any schedule**

5. [Redacted]

I have used all reasonable diligence in preparing this statement. The information herein and in any attached schedules is true and complete. I acknowledge and certify under penalty of perjury under the laws of the State of California that the information provided is true and correct.

Date Signed 2/3/15  
(month, day, year)