RECEIVED	
AUG 202021 PUBLIC OFFICIAL FINANCIAL DISCLOSURE STATEMENT	
AND TO SEFICE	
Name: Mailing Address: 765 Douglas Are.	
Mailing Address: 765 Douglas Ave.	
Business Phone: (970)6675486 Residence Phone: 970 420 - 509	
1. The name and nature of any entity (other than the City of Loveland and corporate bodies organized the City of Loveland) which provides a source of income directly or indirectly* to the person making disclosure. (Sec. 2.14.010 (I) (1) (a).)	
Childrens Museum Northern Co	
Social Security	
(Sec. 2.14.010 (I) (1) (b) (i).)	
3. The name and nature of any entity (other than the City of Loveland and corporate bodies organized the City of Loveland) in which the person making disclosure has any interest or control, through sto ownership other than listed securities, or otherwise and from which the person has the potential receiving pecuniary gain. (Sec. 2.14.010 (I) (1) (b) (ii).)	
4. The legal description of real property located within the planning jurisdiction of the City of Loveland which the person making disclosure has any direct or indirect* interest, including but not limited to option to purchase, the market value of which is in excess of five thousand dollars. (Sec. 2.14.010 (I) (c).) 765 Douglas Ave (
Loveland Co 80537	

5. The name of each creditor to whom the person making this disclosure owes money in excess c \$1,000. (Sec. 2.14.010 (I) (1) (d).)
Loancare
Subary Car
<u>Elevations</u> CU
*The words "indirect" and "indirectly" shall include, but not be limited to, income and interests of a spouse or minor child residing with the person making this disclosure to the extent that the income or interest is known to the person making this disclosure and the person making the disclosure receives a pecuniary benefit from or has the potential of receiving a pecuniary benefit from said income or interest.
6. Such additional information as the person making this disclosure might desire.
Dated this 201 day of August 2011.
The above statements are hereby certified to be true and correct to the best of my knowledge.
Rathia. Wright Signature of Public Official
STATE OF COLORADO) CITY OF LOVELAND) ss COUNTY OF LARIMER)
It is hereby certified that the foregoing instrument was acknowledged before me this 20th day of
<u>August</u> , 2021.
Notari John Scott
S E A L
My commission expires: hpalaolao
LANA SCOTT Notary Public State of Colorado Notary ID # 20014039737