

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received
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Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	
Lewis	Robert		W	
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)				
Rowland Water District				
Division, Board, Department, District, if applicable		Your Po	osition	
Division 4		Board	d of Director	
▶ If filing for multiple positions, list below or on ar	attachment. (Do not use	acronyms)		
Agency: Puente Basin Water Agency		Positio	n: Commissioner	
2. Jurisdiction of Office (Check at least on	e box)			
State			, Retired Judge, Pro Tem Jowide Jurisdiction)	udge, or Court Commissioner
Multi-County		Count	y of Los Angeles	
City of		Other		
3. Type of Statement (Check at least one be	ox)			
Annual: The period covered is January 1, 20 December 31, 2022.	22, through	Leav	ing Office: Date Left (Check one	
The period covered is/ December 31, 2022.	/, through		he period covered is Janual eaving office.	ry 1, 2022, through the date of
Assuming Office: Date assumed/			he period covered is ne date of leaving office.	, through
Candidate: Date of Election	and office sought,	if different thar	n Part 1:	
l. Schedule Summary (required)	► Total number	of pages in	cluding this cover pa	ge: 3
Schedules attached				
Schedule A-1 - Investments - schedule att.	ached	Schedule C	Income, Loans, & Busines	s Positions – schedule attached
Schedule A-2 - Investments – schedule att	ached	Schedule D	Income - Gifts - schedule	attached
Schedule B - Real Property – schedule atta	ached	Schedule E -	Income – Gifts – Travel Pa	ayments - schedule attached
- N				
-or- None - No reportable interests on	any schedule			
5. Verification	OUTV			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY		STATE	ZIP CODE
3021 Fullerton Road		d Heights	CA	91748
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
(562) 6971726		rlewis@rw		
I have used all reasonable diligence in preparing thi herein and in any attached schedules is true and c	s statement. I have review omplete. I acknowledge tl	ed this statem his is a public	ent and to the best of my kn document.	nowledge the information contained
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
Date Signed 2/14/2023	21	ww.a4	00=11	0
(month, day, year)		gnature	(File the originally signed paper state	tement with your filing official.)

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

CALIFORN	ΑF	ORM	7/(
FAIR POLITICAL	PRAC	CTICES	COMM	ISSION	
Name	en einer ein				
Blow	N	Le	بيازيو	-	
1 - 5 - 7				2	-

Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
LINEOLN FINANCIAL GROUP GENERAL DESCRIPTION OF THIS BUSINESS	
	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$10,000 \$10,000 \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499	NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//22//22_ ACQUIRED DISPOSED	//22//22 ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other(Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE: //22
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//22//22 ACQUIRED DISPOSED	//22//22 ACQUIRED DISPOSED
Comments:	

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES C	
Name	
Robert W. Lewi	s

	A ACCESCABLE DATION AND ADDRESS ADDRESS
ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
2231 FULLENTON ROLD #3	
CITY	CITY
ROWLAND HEIGHTS	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 Over	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Cownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
LeaseholdOther	LeaseholdOther
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$190,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None
	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER*
17 mile 37 12(1)2(1)	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
" None " None " None " " " " " " " " " " " " " " " " " " "	None%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST SALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
	1.1