

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
**Cherry** **Suzanne**

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

Agency Name (Do not use acronyms)  
**Encore Education Corporation**

Division, Board, Department, District, if applicable: **Board**  
Your Position: **Board President**

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

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

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

- State
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other **Charter School**

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

- Annual:** The period covered is January 1, 2020, through December 31, 2020.
- or-
- The period covered is \_\_\_\_\_ through December 31, 2020.
- Assuming Office:** Date assumed \_\_\_\_\_
- Candidate:** Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle.)
- The period covered is January 1, 2020, through the date of leaving office.
- or-
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

**4. Schedule Summary (must complete)** ▶ Total number of pages including this cover page: 4

**Schedules attached**

- 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. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
**16955 Lemon Street** **Hesperia** **CA** **92345**  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
**(760) 949-2036** **scherry@encoreedcorp.com**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/5/21 Signature Suzanne R. Cherry  
(month, day, year) (File the originally signed paper statement with your filing official.)

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

**1. BUSINESS ENTITY OR TRUST**

Name Tom Cherry Vintage

Address (Business Address Acceptable) 20594 TONAWANDA Rd, Apple Valley Ca 92307

Check one  
 Trust, go to 2      Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Retail Sales

**FAIR MARKET VALUE**     **IF APPLICABLE, LIST DATE:**

\$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 7/1/2003     DISPOSED / / 20

**NATURE OF INVESTMENT**  
 Partnership      Sole Proprietorship      Other

**YOUR BUSINESS POSITION** owner

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499      \$10,001 - \$100,000  
 \$500 - \$1,000      OVER \$100,000  
 \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)**

None     or      Names listed below

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT      REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property \_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

**FAIR MARKET VALUE**     **IF APPLICABLE, LIST DATE:**

\$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED / / 20     DISPOSED / / 20

**NATURE OF INTEREST**  
 Property Ownership/Deed of Trust      Stock      Partnership  
 Leasehold \_\_\_\_\_ Yrs. remaining      Other \_\_\_\_\_  
 Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**1. BUSINESS ENTITY OR TRUST**

Name \_\_\_\_\_

Address (Business Address Acceptable) \_\_\_\_\_

Check one  
 Trust, go to 2      Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

**FAIR MARKET VALUE**     **IF APPLICABLE, LIST DATE:**

\$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED / / 20     DISPOSED / / 20

**NATURE OF INVESTMENT**  
 Partnership      Sole Proprietorship      Other

**YOUR BUSINESS POSITION** \_\_\_\_\_

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499      \$10,001 - \$100,000  
 \$500 - \$1,000      OVER \$100,000  
 \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)**

None     or      Names listed below

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT      REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property \_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

**FAIR MARKET VALUE**     **IF APPLICABLE, LIST DATE:**

\$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED / / 20     DISPOSED / / 20

**NATURE OF INTEREST**  
 Property Ownership/Deed of Trust      Stock      Partnership  
 Leasehold \_\_\_\_\_ Yrs. remaining      Other \_\_\_\_\_  
 Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_



**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name  
\_\_\_\_\_

▶ **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Sleep Number

ADDRESS (Business Address Acceptable)

12717 MAIN St. Ste 520, Hesperia  
CA 92345

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Retail Mattress Sales

YOUR BUSINESS POSITION

STORE MANAGER

GROSS INCOME RECEIVED  No Income - Business Position Only

- \$500 - \$1,000             \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary       Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

Loan repayment

Commission or       Rental Income, list each source of \$10,000 or more

(Describe)

Other \_\_\_\_\_  
(Describe)

▶ **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED  No Income - Business Position Only

- \$500 - \$1,000             \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary       Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

Loan repayment

Commission or       Rental Income, list each source of \$10,000 or more

(Describe)

Other \_\_\_\_\_  
(Describe)

▶ **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

Comments: \_\_\_\_\_

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%       None

SECURITY FOR LOAN

None               Personal residence

Real Property \_\_\_\_\_  
Street address

City

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
(Describe)

Print

Clear