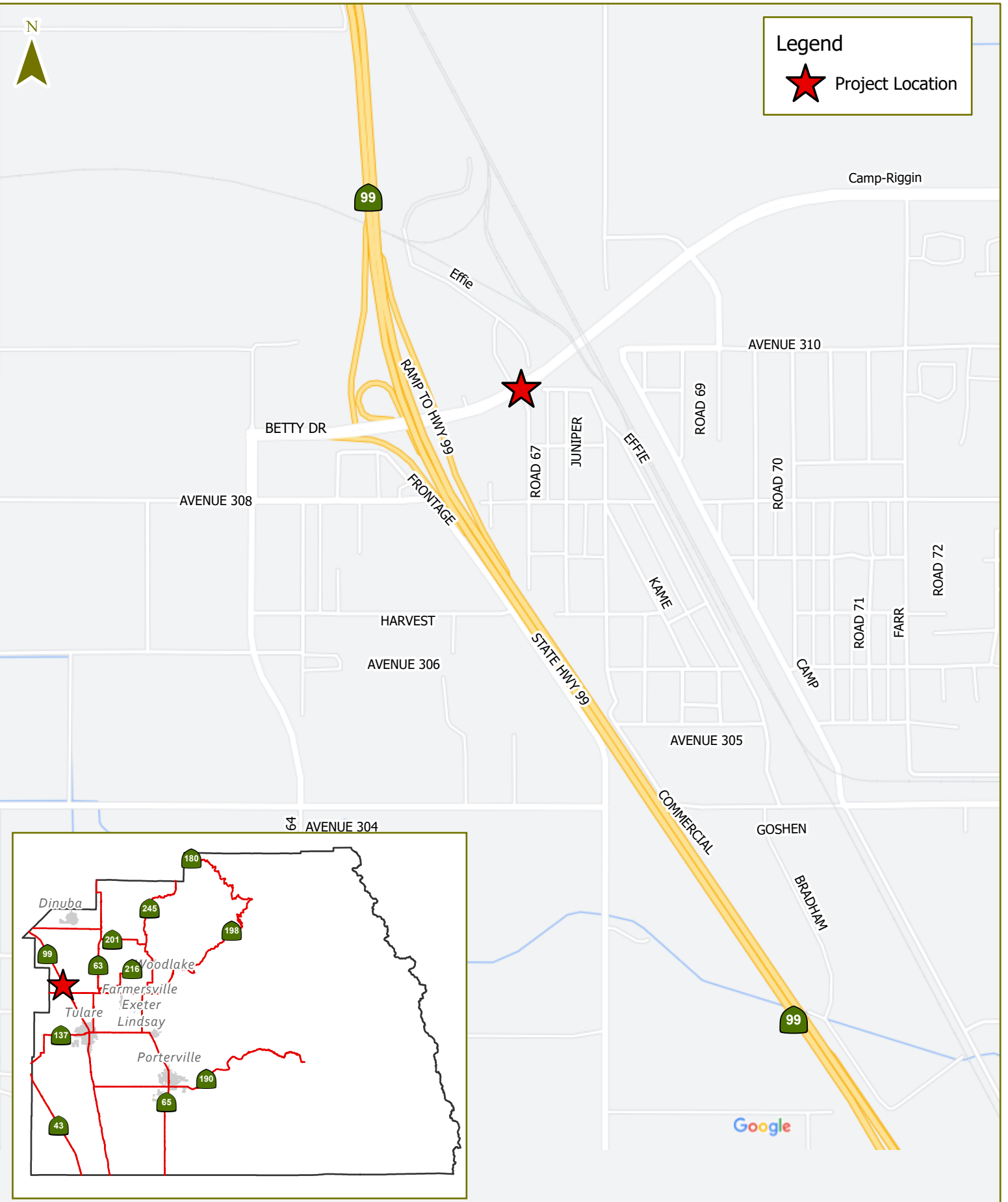


Attachment A

Vicinity Map



Attachment C

Levine Act

ATTACHMENT C
To Administrative Regulation 49

COUNTY OF TULARE
CAMPAIGN CONTRIBUTION DISCLOSURE FORM

Application or Solicitation Number: Cost-Sharing Agreement for Road 67 Operational Improvements
Application or Solicitation Title: Project

Was a campaign contribution, regardless of the dollar amount, made to any member of the Tulare County Board of Supervisors or to any County Officer, within the last 12 months, by the applicant, or, if applicable, any of the applicant's proposed subcontractors or the applicant's agent or lobbyist?

Yes ☒ No ☐

If no, please sign and date below.

If yes, please provide the following information:

Applicant's Name: Gurpreet S Thandi
Contributor(s) or Contributor Firm's Name: Valley Fuel Goshen, Inc.
Contributor(s) or Contributor Firm's Address: 6603 Betty Dr Visalia, CA 93291

Is the Contributor: (check applicable boxes)

| | | | |
|---|-----|--|--------------------------|
| <input checked="" type="checkbox"/> The Applicant | Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> |
| <input type="checkbox"/> Subcontractor | Yes | <input type="checkbox"/> No | <input type="checkbox"/> |
| <input type="checkbox"/> The Applicant's agent/ or lobbyist | Yes | <input type="checkbox"/> No | <input type="checkbox"/> |

Note: Under California law as implemented by the Fair Political Practices Commission, campaign contributions made by the Applicant and the Applicant's agent/lobbyist who is representing the Applicant in this application or solicitation must be aggregated together to determine the total campaign contribution made by the Applicant.

Identify the Board of Supervisors Member(s) and County Agency Officer(s) to whom you, your subcontractors, and/or agent/lobbyist made campaign contributions, within the last 12 months, the name of the contributor, the dates of contribution(s) and dollar amount of the contribution. Each date must include the exact month, day, and year of the contribution.

Name of Board of Supervisors Member or County Agency Officer: Mike Bourdreaux
Name of Contributor(s): Valley Fuel Goshen, Inc.
Date(s) of Contribution(s): January 5th 2024
Amount(s): 2500.00

(Please add an additional sheet(s) to identify additional Board Members or County Agency Officer to whom you, your subconsultants, and/or agent/lobbyist made campaign contributions)

By signing below, I certify that the statements made herein are true and correct. I also agree to disclose to the County any future contributions made to Board Members or County Agency Officers by the applicant, or, if applicable, any of the applicant's proposed subcontractors or the applicant's agent or lobbyist after the date of signing this disclosure form, and within 12 months following the approval, renewal, or extension of the requested license, permit, or entitlement to use.

07/05/2024

Date

Valley Fuel Goshen, Inc.

Print Firm Name if applicable



Signature of Applicant

Gurpreet S Thandi

Print Name of Applicant

ATTACHMENT C
To Administrative Regulation 49

COUNTY OF TULARE
CAMPAIGN CONTRIBUTION DISCLOSURE FORM

Application or Solicitation Number: Cost-Sharing Agreement for Road 67 Operational Improvements
Application or Solicitation Title: Project

Was a campaign contribution, regardless of the dollar amount, made to any member of the Tulare County Board of Supervisors or to any County Officer, within the last 12 months, by the applicant, or, if applicable, any of the applicant's proposed subcontractors or the applicant's agent or lobbyist?

Yes ☒ No ☐

If no, please sign and date below.

If yes, please provide the following information:

Applicant's Name: Gurpreet S Thandi
Contributor(s) or Contributors Firm's Name: Valley Fuel Tipton, Inc.
Contributor(s) or Contributor Firm's Address: 412 S Burnett Rd Tipton, CA 93272

Is the Contributor: (check applicable boxes)

| | | | | | |
|-------------------------------------|------------------------------------|-----|-------------------------------------|----|--------------------------|
| <input checked="" type="checkbox"/> | The Applicant | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| <input type="checkbox"/> | Subcontractor | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| <input type="checkbox"/> | The Applicant's agent/ or lobbyist | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

Note: Under California law as implemented by the Fair Political Practices Commission, campaign contributions made by the Applicant and the Applicant's agent/lobbyist who is representing the Applicant in this application or solicitation must be aggregated together to determine the total campaign contribution made by the Applicant.

Identify the Board of Supervisors Member(s) and County Agency Officer(s) to whom you, your subcontractors, and/or agent/lobbyist made campaign contributions, within the last 12 months, the name of the contributor, the dates of contribution(s) and dollar amount of the contribution. Each date must include the exact month, day, and year of the contribution.


Name of Board of Supervisors Member or County Agency Officer: Pete Vanderpool
Name of Contributor(s): Valley Fuel Tipton, Inc.
Date(s) of Contribution(s): March 3rd 2024
Amount(s): 2500.00

(Please add an additional sheet(s) to identify additional Board Members or County Agency Officer to whom you, your subconsultants, and/or agent/lobbyist made campaign contributions)

By signing below, I certify that the statements made herein are true and correct. I also agree to disclose to the County any future contributions made to Board Members or County Agency Officers by the applicant, or, if applicable, any of the applicant's proposed subcontractors or the applicant's agent or lobbyist after the date of signing this disclosure form, and within 12 months following the approval, renewal, or extension of the requested license, permit, or entitlement to use.

07/05/2024
Date

Valley Fuel Tipton, Inc.
Print Firm Name if applicable


Signature of Applicant
Gurpreet S Thandi
Print Name of Applicant