

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

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| Please type or print in ink. | | | | | 2 |
|---|--|------------------|----------------------|--|--------------------------------------|
| NAME OF FILER (LAST) | (FIRST) | | | (MIDDLE) | |
| Duron | Ysabel | I | | | |
| 1. Office, Agency, or Co | ourt | | | | |
| Agency Name (Do not use a | ncronyms) | | | | |
| , | Regenerative Medicine | | | | |
| Division, Board, Department, | | | Your Position | on | |
| | | | ICOC B | oord Mambar | |
| If filing for multiple position | as list below or an an attachmen | at /Do not upo | | oard Member | |
| ► If filing for multiple position | ns, list below or on an attachmer | nt. (Do not use | e acronyms) | | |
| Agency: | | | Position: _ | | |
| 2. Jurisdiction of Office | Check at least one box) | | | | |
| State ■ State | , | | ☐ Judae. Re | etired Judge. Pro Tem | Judge, or Court Commissioner |
| <u></u> | | | | Jurisdiction) | g-, |
| Multi-County | | | County of | f | |
| □ o;; | | | | | |
| | | | | | |
| 3. Type of Statement (c | Check at least one box) | | | | |
| December 31, | rered is January 1, 2020, through 2020 . | h | Leaving | | / ne circle.) |
| -or- The period cov December 31, | rered is/ | , through | _ | period covered is Janua ng office. | ary 1, 2020, through the date of |
| Assuming Office: Date | assumed | | ○ The | period covered is late of leaving office. | /, through |
| Candidate: Date of Elec | ction and | d office sought, | if different than Pa | art 1: | |
| 1 Schodulo Summary | (must complete) . To | tal mumbar | of manne inch | odina thia aasawa | |
| 4. Schedule Summary (Schedules attached | | nai number | or pages inclu | iding this cover p | age:5 |
| Schedule A-1 - Inves | tments - schedule attached | × | Schedule C - Inc | come, Loans, & Busine | ss Positions - schedule attached |
| Schedule A-2 - Inves | tments - schedule attached | | Schedule D - Inc | come - Gifts - schedul | e attached |
| ⋉ Schedule B - Real Pi | roperty - schedule attached | | Schedule E - Inc | come – Gifts – Travel F | Payments – schedule attached |
| | | | | | |
| -or- 🗌 None - No repo | rtable interests on any sch | nedule | | | |
| 5. Verification | | | | | |
| | STREET " | CITY | | STATE | ZIP CODE |
| (Business or Agency Address Recom 1999 Harrison St | тепаеа - Ривііс Document) | Oaklar | nd | CA | 94612-3520 |
| DAYTIME TELEPHONE NUMBER | | Oakiai | EMAIL ADDRESS | - CA | 94012-3320 |
| (510)340-9114 | | | ysabelduron@ | @gmail.com | |
| | igence in preparing this statemer chedules is true and complete. | | wed this statement | and to the best of my k | knowledge the information contained |
| • | erjury under the laws of the St | _ | · | | ct. |
| Date Signed 03/27 | 7/2021 10:56 PM | Si | ignature | Electronic | Submission |
| | month, day, year) | • | | File the originally signed paper s | tatement with your filing official.) |

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700

| FAIR POLITICAL PRACTICES COMMISSION |
|-------------------------------------|
| Name |
| Ysabel Duron |
| |

| | ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS |
|---|---|
| 278 North 7th Street | |
| CITY | CITY |
| San Jose, CA 95112 | |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 |
| NATURE OF INTEREST | NATURE OF INTEREST |
| X Ownership/Deed of Trust ☐ Easement | Ownership/Deed of Trust Easement |
| Leasehold | Leasehold |
| IF RENTAL PROPERTY, GROSS INCOME RECEIVED | IF RENTAL PROPERTY, GROSS INCOME RECEIVED |
| \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 | \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 |
| \$10,001 - \$100,000 OVER \$100,000 | S10,001 - \$100,000 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. |
| | 11 |
| | al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows: |
| business on terms available to members of the public | without regard to your official status. Personal loans and |
| business on terms available to members of the public loans received not in a lender's regular course of business NAME OF LENDER* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) | without regard to your official status. Personal loans and ness must be disclosed as follows: |
| business on terms available to members of the public loans received not in a lender's regular course of business NAME OF LENDER* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) PO Box 77404 BUSINESS ACTIVITY, IF ANY, OF LENDER | without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* |
| business on terms available to members of the public loans received not in a lender's regular course of business NAME OF LENDER* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) PO Box 77404 BUSINESS ACTIVITY, IF ANY, OF LENDER Ewing, NJ 08628 | without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER |
| business on terms available to members of the public loans received not in a lender's regular course of business name of Lender* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) PO Box 77404 BUSINESS ACTIVITY, IF ANY, OF LENDER Ewing, NJ 08628 INTEREST RATE TERM (Months/Years) | without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) |
| business on terms available to members of the public loans received not in a lender's regular course of business name of Lender* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) PO Box 77404 BUSINESS ACTIVITY, IF ANY, OF LENDER Ewing, NJ 08628 | without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER |
| business on terms available to members of the public loans received not in a lender's regular course of businame of Lender* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) PO Box 77404 BUSINESS ACTIVITY, IF ANY, OF LENDER Ewing, NJ 08628 INTEREST RATE TERM (Months/Years) 2.750 30vrs | without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) |
| business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business NAME OF LENDER* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) PO Box 77404 BUSINESS ACTIVITY, IF ANY, OF LENDER Ewing, NJ 08628 INTEREST RATE TERM (Months/Years) 2.750 None 30yrs | without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* |
| business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business NAME OF LENDER* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) PO Box 77404 BUSINESS ACTIVITY, IF ANY, OF LENDER Ewing, NJ 08628 INTEREST RATE TERM (Months/Years) 2.750 None 30yrs HIGHEST BALANCE DURING REPORTING PERIOD | without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) ——————————————————————————————————— |
| business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business numbers. NAME OF LENDER* AmeriHome Mortgage Company, LLC ADDRESS (Business Address Acceptable) PO Box 77404 BUSINESS ACTIVITY, IF ANY, OF LENDER Ewing, NJ 08628 INTEREST RATE TERM (Months/Years) 2.750 None 30yrs HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 | without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* |

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

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name |
| Ysabel Duron |

| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME | | |
|---|--|--|--|
| The Latino Cancer Institute (501c3) | | | |
| ADDRESS (Business Address Acceptable) | National Institutes of Health (The Emmes Co) ADDRESS (Business Address Acceptable) | | |
| 123 East San Carlos Street, #413 | 401 N. Washington St. #700 Rockville, MD 20850 | | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE | | |
| Manage program development for the agency | Review scientific applications for AOU Program | | |
| YOUR BUSINESS POSITION | YOUR BUSINESS POSITION | | |
| ExecDirector | Institutional Review Board Member | | |
| GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$1,001 - \$10,000 X \$10,001 - \$100,000 OVER \$100,000 | GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 | | |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) | 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.) | Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) | | |
| Sale of | Sale of | | |
| (Real property, car, boat, etc.) | (Real property, car, boat, etc.) Loan repayment | | |
| | | | |
| Commission or Rental Income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more | | |
| (Describe) | (Describe) | | |
| | | | |
| Other | X Other Stipend | | |
| Other(Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F | Other Stipend (Describe) | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the state of the sta | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follows. | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follows. | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: INTEREST RATE Wone None | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER* | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official regular course of business must be disclosed as follow. NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) None SECURITY FOR LOAN | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follow. NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) Whone SECURITY FOR LOAN None Personal residence | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) Whone SECURITY FOR LOAN None Personal residence | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follow. 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 | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's: INTEREST RATE Whone SECURITY FOR LOAN None Personal residence Real Property Street address | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follow 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 | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) ——————————————————————————————————— | | |
| * You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follow. 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 | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years) ——————————————————————————————————— | | |

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

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name |
| Ysabel Duron |

| 1. INCOME RECEIVED | ► 1. INCOME RECEIVED |
|---|---|
| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME |
| The Latino Cancer Institute | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 123 East San Carlos Street #413 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| Manage national network of Latino cancer agencies | |
| YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| President/Executive Director | |
| GROSS INCOME RECEIVED No Income - Business Position Only | GROSS INCOME RECEIVED No Income - Business Position Only |
| \$500 - \$1,000 \$1,001 - \$10,000 | \$500 - \$1,000\$1,001 - \$10,000 |
| ■ \$10,001 - \$100,000 OVER \$100,000 | S10,001 - \$100,000 OVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) | 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.) | Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) |
| Sale of | Sale of |
| (Real property, car, boat, etc.) | (Real property, car, boat, etc.) |
| Loan repayment | Loan repayment |
| Commission or Rental Income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more |
| (Describe) | (Describe) |
| | |
| Other (Describe) | Other(Describe) |
| ▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F | PERIOD |
| a retail installment or credit card transaction, made in the | lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: |
| NAME OF LENDER* | INTEREST RATE TERM (Months/Years) |
| ADDRESS (Business Address Acceptable) | % |
| (| SECURITY FOR LOAN |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | None Personal residence |
| | |
| LIICUTET DAI ANCE DUDING DEDOSTING DEDICO | Real Property |
| HIGHEST BALANCE DURING REPORTING PERIOD | |
| 1 1 8500 - \$7 000 | |
| \$500 - \$1,000 | City |
| \$1,001 - \$10,000 | |
| | |
| \$1,001 - \$10,000 | Guarantor Other |
| \$1,001 - \$10,000 \$10,001 - \$100,000 | Guarantor |
| \$1,001 - \$10,000 \$10,001 - \$100,000 | Guarantor Other |

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

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name |
| Ysabel Duron |

| 1. INCOME RECEIVED | ► 1. INCOME RECEIVED |
|--|---|
| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME |
| CIOX Health, LLC | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 925 North Point Pkwy, Site 350, Alpharetta, GA30005 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| Scientific Advisory Board | |
| YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| Consultant | |
| GROSS INCOME RECEIVED No Income - Business Position Only | GROSS INCOME RECEIVED No Income - Business Position Only |
| \$500 - \$1,000 \$1,001 - \$10,000 | \$500 - \$1,000 \$1,001 - \$10,000 |
| ■ \$10,001 - \$100,000 OVER \$100,000 | S10,001 - \$100,000 OVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) | 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.) | Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) |
| Sale of | Sale of |
| (Real property, car, boat, etc.) | (Real property, car, boat, etc.) |
| Loan repayment | Loan repayment |
| Commission or Rental Income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more |
| (Describe) | (Describe) |
| Other Consultant Fee | Other |
| (Describe) | (Describe) |
| a retail installment or credit card transaction, made in t | I lending institution, or any indebtedness created as part of he lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s: |
| NAME OF LENDER* | INTEREST RATE TERM (Months/Years) |
| ADDRESS (B. days Address Addre | % |
| ADDRESS (Business Address Acceptable) | SECURITY FOR LOAN |
| | SECURITY FOR LOAN None Personal residence |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | Notic i elsonal residence |
| | Real PropertyStreet address |
| HIGHEST BALANCE DURING REPORTING PERIOD | Sueet address |
| <u>\$500 - \$1,000</u> | City |
| \$1,001 - \$10,000 | |
| | Guarantor |
| OVER \$100,000 | |
| | Other(Describe) |
| | |
| Comments: | |