## CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

## **COVER PAGE**

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Please type or print in ink.	A PUB	LIC DOCUMENT	MHK 02 2020 MO3:00
NAME OF FILER (LAST)	(FIRST)		(MIDOLE)
Costa	Michael	Andrew	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)	_		
City of Elk Grove			
Division, Board, Department, District, if applicable		Your Position	
Public Works Department - Transit Div	vision	Transit System Manager	
▶ If filing for multiple positions, list below or on a	n attachment. (Do not use		
Agency:	Position:		
2. Jurisdiction of Office (Check at least or	ne box)		
☐ State		☐ Judge, Retired Judge, Pro 1 (Statewide Jurisdiction)	em Judge, or Court Commissioner
Multi-County		County of	
⊠ City of Elk Grove		<u> </u>	
E 01, 0.			
3. Type of Statement (Check at least one b	ox)		•
Annual: The period covered is January 1, 20 December 31, 2019.	)19, through	Leaving Office: Date Left (Chec	ck one circle.)
The period covered is/	, through	O The period covered is a feaving office.	lanuary 1, 2019, through the date of
Assuming Office: Date assumed/_			e. through
Candidate: Date of Election	and office sought,	if different than Part 1:	<del></del>
4. Schedule Summary (must complete	Total number	of pages including this cove	1. D306.
Schedules attached	) Piotei number	or pages including this cove	r page. ———
☐ Schedule A-1 - Investments – schedule at ☐ Schedule A-2 - Investments – schedule at ☐ Schedule B - Real Property – schedule at	tached	Schedule C - Income, Loans, & Bu Schedule D - Income – Gifts – sch Schedule E - Income – Gifts – Tre	
-Or- ☑ None - No reportable interests or	n any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document	CITY	STATE	ZIP CODE
8401 Laguna Palms Way	Elk Grove	CA	95758
DAYTIME TELEPHONE NUMBER	-	EMAIL ADDRESS	
( 916 ) 687-3030		mcosta@elkgrovecity.org	
I have used all reasonable diligence in preparing the herein and in any attached schedules is true and			my knowledge the information contained
I certify under penalty of perjury under the law	s of the State of Californ	ia that the foregoing is true and co	orrect.
Date Signed <u>03/02/2020</u>	Si	gnature Mulael (o.	
(month day year)	· · · · · · · · · · · · · · · · · · ·	If in the connective spread or	ener statement with your films officed I