

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Gallagher	Sean	Timothy
1. Office, Agency, or Court		le .
Agency Name (Do not use acronyms)		
City of Elk Grove		
Division, Board, Department, District, if applicable		Your Position
Public Works		Division Manager - O&M
▶ If filing for multiple positions, list below or on	an attachment. (Do not us	se acronyms)
Agency:		Position:
2. Jurisdiction of Office (Check at least of	one box)	
☐ State	·	 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of
□ City of Elk Grove		Other
3. Type of Statement (Check at least one	box)	
Annual: The period covered is January 1, 2 December 31, 2019.	2019, through	Leaving Office: Date Left/
The period covered is/ December 31, 2019.	, through	 The period covered is January 1, 2019, through the date of leaving office. -or-
Assuming Office: Date assumed/_		The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office sought	t, if different than Part 1:
4. Schedule Summary (must complet	e) ► Total number	of pages including this cover page:
Schedules attached	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	.u. d. d	Schedule C - Income, Loans, & Business Positions – schedule attached
Schedule A-1 - Investments - schedule a Schedule A-2 - Investments - schedule a		☐ Schedule D - Income — Gifts — schedule attached
Schedule B - Real Property - schedule a		☐ Schedule E - Income — Gifts — Travel Payments — schedule attached
Schedule B - Near Property Schedule 8	L.	
-or- None - No reportable interests on any schedule		
5. Verification		
MAILING ADDRESS STREET	CITY	STATE ZIP CODE
(Business or Agency Address Recommended - Public Docume 10250 Iron Rock Way	Elk Grove	CA 95624
DAYTIME TELEPHONE NUMBER	LIK GIOVE	EMAIL ADDRESS
(916) 687-3005		sgallagher@elkgrovecity.org
		ewed this statement and to the best of my knowledge 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 05/05/2020		Signature Signature
(month. day. year)	•	(File the originally signed paper statement with your filing official.)