

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

COVER PAGE

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Please type or print in ink.

A PUBLIC DOCUMENT

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
•	, , ,	John	(····====)
Jordan	Christopher	John	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
City of Elk Grove			
Division, Board, Department, District, if applica	ble	Your Position	
		Director of Strategic Plan	ning and Innovation
► If filing for multiple positions, list below or c	on an attachment. (Do not use a	acronyms)	
Agency:		Position:	
Agency.		T SOILONE	
2. Jurisdiction of Office (Check at leas	t one box)		
☐ State		Judge, Retired Judge, Pro Tem (Statewide Jurisdiction)	Judge, or Court Commissioner
Multi-County		County of	
☑ City of Elk Grove		☐ Other	
on one			
3. Type of Statement (Check at least of	ne box)		
Annual: The period covered is January December 31, 2019.	1, 2019, through	Leaving Office: Date Left (Check of	/ ne circle.)
The period covered is/_ December 31, 2019.	, through	The period covered is Janu leaving office.-or-	ary 1, 2019, through the date of
Assuming Office: Date assumed	J		, through
Candidate: Date of Election	and office sought, if	different than Part 1:	
A Calculula Communa (month a mark	1040) - 1		4
4. Schedule Summary (must complete Schedules attached	ete) ► Total number o	f pages including this cover p	age:
Schedule A-1 - Investments - schedul	e attached	Schedule C - Income, Loans, & Busine	ess Positions – schedule attached
Schedule A-2 - Investments – schedul	<u> </u>	Schedule D - Income - Gifts - schedul	le attached
Schedule B - Real Property - schedul		Schedule E - Income – Gifts – Travel I	Payments - schedule attached
-Or- None - No reportable interests	s on any schedule		
5. Verification			
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Public Doct 8401 Laguna Palms Way	Elk Grove	CA	95758
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	30700
(916)478-2222	1 = 1	cjordan@elkgrovecity.org	
I have used all reasonable diligence in preparir			knowledge the information contained
herein and in any attached schedules is true a			
I certify under penalty of perjury under the	laws of the State of California	a that the foregoing is true and corre	ct
2/40/2022		10	
Date Signed 3/18/2020	Sig	nature	alalament with your filing official 1
(month, day, year)		(rive the originally signed paper s	statement with your filing official.)

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Intel	Microsoft
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Technology Company	Computer Software
	
FAIR MARKET VALUE	FAIR MARKET VALUE \$2,000 - \$10,000 \$\begin{align*} \times 10,001 - \$100,000 \times 10,001 - \$100,000
× \$2,000 - \$10,000	
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
Stock Other (Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	// 19// 19
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Chevron Corporation	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Energy	
FAIR MARKET VALUE	FAIR MARKET VALUE
x \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	MATURE OF INVESTMENT
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	-
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	☐ Stock ☐ Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_19	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
·	
Comments:	

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Rental Property	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
10894 Atherstone Drive, Rancho Cordova	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Rental Property	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Property Owner	
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	☐ \$10,001 - \$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
Gross rental income	(Describe)
Other	Other
(Describe)	(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F	PERIOD
a retail installment or credit card transaction, made in the	I lending institution, or any indebtedness created as part of he lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's
rogalar oburdo di sadinoso masi se alcolossa de lellen	<u> </u>
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable)	OF CUIDITY FOR LOAN
	SECURITY FOR LOAN None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	Notice
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Silver adviess
\$500 - \$1,000	City
\$1,001 - \$10,000	Consenter
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
Comments:	

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.

NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Aspen Institute	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2300 N Street, NW, Suite 700	
CITY AND STATE	CITY AND STATE
Washington, DC, 20037	
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE nonpart. forum for values-based leadership and ideas	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURC
DATE(S): 10 / 26 / 19 - 10 / 29 / 19 AMT: \$	DATE(S):/AMT:\$
MUST CHECK ONE: X Gift -or- Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
- If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURC
DATE(S):/	DATE(S):/ AMT:\$
MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	