

## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

## **COVER PAGE**

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A PUBLIC DOCUMENT

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NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	
Kent	Paul	David		
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)				
Elk Grove Police Department				
Division, Board, Department, District, if applicable	pplicable Your Position			
Operations		Lieutenant		
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)				
Agency:		Position:		
2. Jurisdiction of Office (Check at least one box)				
☐ State		☐ Judge, Retired Judge, Pro Tem J (Statewide Jurisdiction)	ludge, or Court Commissioner	
Multi-County		County of		
Oily 01			-	
3. Type of Statement (Check at least one	box)			
Annual: The period covered is January 1, December 31, 2019.	2019, through	Leaving Office: Date Left		
The period covered is/ December 31, 2019.	_/, through	<ul> <li>The period covered is Janual leaving office.</li> <li>-or-</li> </ul>	ary 1, 2019, through the date of	
Assuming Office: Date assumed/_	<b></b> 31			
Candidate: Date of Election and office sought, if different than Part 1:				
4. Schedule Summary (must complete) ► Total number of pages including this cover page:				
Schedules attached				
Schedule A-1 - Investments – schedule	attached	Schedule C - Income, Loans, & Busines	ss Positions – schedule attached	
Schedule A-1 - Investments - schedule	<u> </u>	Schedule D - Income - Gifts - schedule		
Schedule B - Real Property – schedule		□ □ <b>Schedule E -</b> Income – Gifts – Travel P	ayments – schedule attached	
		_		
-or- ☑ None - No reportable interests on any schedule				
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docume	CITY CITY	STATE	ZIP CODE	
8380 Laguna Palms Wy.	Elk Grove	Ca	95242	
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
( 916 ) 753-3441		pkent@elkgrovepd.org		
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.				
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
Date Signed 12-28-28				
Date Signed (month, day, year)	S	ignatóre (File the originally signed paper st	alement with your filing official.)	