CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

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Please type or print in ink.				
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	
Koerner	Andrea		S	
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)				
City of Elk Grove				
Division, Board, Department, District, if app	licable	Your Position		
Public Works Department		Administrativ	e Analyst	
► If filing for multiple positions, list below	or on an attachment. (Do not	use acronyms)		
Agency:		Position:		
2. Jurisdiction of Office (Check at I	least one box)			
☐ State		☐ Judge, Retired J (Statewide Jurisd	-	dge, or Court Commissioner
Multi-County		County of		
City of Elk Grove				
				*
3. Type of Statement (Check at leas	t one box)		-00	07 0004
Annual: The period covered is Janua December 31, 2020.	ry 1, 2020 , through	Leaving Office	: Date Left 08 (Check one	27 2021 circle.)
-or- The period covered is December 31, 2020 .	_/, through	The period of leaving office		, 1, 2020, through the date of
Assuming Office: Date assumed		○ The period of	covered is	/, through
Candidate: Date of Election	and office sou	ght, if different than Part 1:		
4. Schedule Summary (must con	nplete) > Total numb	er of pages including	this cover na	yo. 1
Schedules attached	ipioto, Piotal namb	er or pages including	una cover pag	JG. 1
Schedule A-1 - Investments – sche	adule attached	Schedule C - Income, L	oans, & Business.	Positions – schedule attached
Schedule A-2 - Investments – sche		Schedule D - Income -	Gifts - schedule	attached
Schedule B - Real Property - sche		Schedule E - Income -	Gifts - Travel Pay	ments - schedule attached
concease = read reporty conte	data ditadiida			
-Or- None - No reportable intere	ests on any schedule			
5. Verification	rate on any contract			
MAILING ADDRESS STREET	CITY		STATE	ZIP CODE
(Business or Agency Address Recommended - Public I	Document)	_		
8401 Laguna Palms Way	Elk (Grove	CA	95758
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
(916) 478-2247		akoerner@elkgrove		
I have used all reasonable diligence in prep herein and in any attached schedules is tru			the best of my kno	owledge the information contained
I certify under penalty of perjury under t	the laws of the State of Calif	ornia that the foregoing is	true and correct.	
Date Signed 12-August-2021		Signature An	$\overline{}$	
(month day year)		// File the on	ninally signed paper state	ment with your filing official.)