CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

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| NAME OF FILER (LAST) | (FIRST) | (MIDDLE) | |
|--|-------------------------------------|---|--|
| Hill | Chris | В | |
| 1. Office, Agency, or Court | | | |
| Agency Name (Do not use acronym | s) | | |
| City of Elk Grove | | | |
| Division, Board, Department, District, if applicable | | Your Position | |
| Information Services | | IT Manager | |
| ▶ If filing for multiple positions, list b | elow or on an attachment. (Do not | use acronyms) | |
| Agency: | | Position: | |
| 2. Jurisdiction of Office (Chec | ck at least 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 a | t least one box) | | |
| Annual: The period covered is December 31, 2021. | January 1, 2021, through | Leaving Office: Date Left/(Check one circle.) | |
| The period covered is December 31, 2021. | , through | ☐ The period covered is January 1, 2021, through the date of leaving office. | |
| Assuming Office: Date assumed/ | | The period covered is/, through the date of leaving office. | |
| Candidate: Date of Election | and office soug | pht, if different than Part 1: | |
| 4. Schedule Summary (must | complete) ► Total numb | er of pages including this cover page: | |
| Schedules attached | | | |
| Schedule A-1 - Investments - | - schedule attached | Schedule C - Income, Loans, & Business Positions - schedule attached | |
| Schedule A-2 - Investments – schedule attached Schedule D - Income – Gifts – schedule attached | | | |
| Schedule B - Real Property - | | Schedule E - Income - Gifts - Travel Payments - schedule attached | |
| | | | |
| | interests on any schedule | | |
| 5. Verification | OlT/ | ATITE TIP AND | |
| MAILING ADDRESS STREET (Business or Agency Address Recommended - | Public Document) | STATE ZIP CODE | |
| 8400 Laguna Palms Way | Elk 0 | Grove CA 95758 | |
| DAYTIME TELEPHONE NUMBER (916) 6273301 | | EMAIL ADDRESS chill@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 | ge this is a public document. | |
| I certify under penalty of perjury u | nder the laws of the State of Calif | ornia that the foregoing is true and correct. | |
| Date Signed 1.10 | .22 | Signature () da a Sta a | |
| Date Signed (month, day | | Signature (File the originally signed paper statement with your filing official.) | |

Print