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.			
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. Office, Agency, or Court			
Agency Name (Do not use acronyms)	ELKGRE)VT N	NAYOR
Division, Board, Department, District, if applic	aule	Tour rosition	
▶ If filing for multiple positions, list below or	on an attachment. (Do not u	se acronyms)	0
Agency: CITY OF Z	BUK GROV	Position:	MAYOR
. Jurisdiction of Office (Check at lea	ast one box)		
State		Judge, Retired Judge, (Statewide Jurisdiction)	Pro Tem Judge, or Court Commissioner)
Multi-County		County of	
□ Multi-County	20VT	Other	
3. Type of Statement (Check at least of	one box)		
Annual: The period covered is January December 31, 2021.	1, 2021, through	Leaving Office: Date	e Left/ (Check one circle.)
The period covered is/. December 31, 2021.	, through	☐ The period covered leaving office.	ed is January 1, 2021, through the date of
Assuming Office: Date assumed	(6)	the date of leavin	ed is/, through g office.
Candidate: Date of Election	8/22 and office sough	nt, if different than Part 1:	
. Schedule Summary (must comp	olete) > Total numb e	r of pages including this	cover page:
Schedules attached			
Schedule A-1 - Investments - sched	Г		& Business Positions – schedule attached
Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached			
Schedule B - Real Property - schedule	ule attached L	Scriedule L - moonie - Sins	- Haver r dymonis - somedule dilutinos
None No reportable interes	ita an any sahadula		
-or- None - No reportable interes	is on any schedule		
5. Verification	CITY		STATE ZIP CODE
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Do	cument)		
8401 LAGUNT	9 PALMS N	LEMAN ADDRESS	NUC CA 95 158
1916) 478 - 22	-86	EMAIL ADDRESS JUNDE	SPEN @ BLKGROVECT
I have used all reasonable diligence in prepar herein and in any attached schedules is true	ing this statement. I have revi and complete. I acknowledge	iewed this statement and to the be e this is a public document.	est of my knowledge the information contained
I certify under penalty of perjury under the	e laws of the State of Califo	rnia that the foregoing is true a	and correct.

Signature

Date Signed

(File the originally signed paper statement with your filing official.)