

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Plε	ease type or print in ink.					
NAME OF FILER (LAST)		(FIRST)	·		(MIDDLE)	
_	Hill	Chirs		В		
1.	Office, Agency, or Court					
Agency Name (Do not use acronyms) City of Elk Grove						
	Division, Board, Department, Distri	ct, if applicable		our Position		
	Police Department			IT Manager		
	▶ If filing for multiple positions, lis	st below or on an attachment. (i	Do not use acrony	ns)	-	
	Agency:			Position:		
<del>_</del> 2.	Jurisdiction of Office (Ca	heck at least one box)				
	State			Judge, Retired Judge, Pro Tem (Statewide Jurisdiction)	Judge, or Court Commissioner	
	Multi-County			County of		
	City of Elk Grove			Other		
3. Type of Statement (Check at least one box)						
	Annual: The period covered December 31, 2022		_	Leaving Office: Date Left (Check of	one circle.)	
	-or- The period covered December 31, 2022	is,	through	_ The period covered is January leaving office.	uary 1, 2022, through the date of	
	Assuming Office: Date assuming	umed	-		, through	
Candidate: Date of Election and office sought, if different				ent than Part 1:		
4.	Schedule Summary (req	chedule Summary (required) ► Total number of pages including this cover page:				
Schedules attached						
Schedule A-2 - Investments – schedule attached  Schedule D		ts - schedule attached	=		ess Positions - schedule attached	
		le D - Income - Gifts - schedule attached				
	Schedule B - Real Proper	ty – schedule attached	Sched	ule E - Income – Gifts – Travel	Payments – schedule attached	
-or- ■ None - No reportable interests on any schedule						
_	Verification					
	MAILING ADDRESS STREE (Business or Agency Address Recommende		CITY	STATE	ZIP CODE	
	8400 Laguna Palms Way		Elk Grove	CA	95758	
	DAYTIME TELEPHONE NUMBER		EMAIL A	DDRESS		
	(916 ) 6273301 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 ir 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 1.10.23		Signature	( hintur		
		day, year)	Jig.ia.ai		statement with your filing official.)	