

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

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| Please type or print in ink. | | FEB 21 2024 ph04:0 |
|--|---------------------------------------|---|
| NAME OF FILER (LAST) | (FIRST) | (MIDDLE) |
| Neronde . | Alicia | Ann |
| I. Office, Agency, or Court | | |
| Agency Name (Do not use acrony | ms) | |
| City Of Elk Grove | | |
| Division, Board, Department, District | t, if applicable | Your Position |
| Animal Services | | Animal Services Supervisor |
| ▶ If filing for multiple positions, list | below or on an attachment. (Do no | ot use acronyms) |
| Agency: | | Position: |
| . Jurisdiction of Office (Ch | eck 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 |
| | | |
| . Type of Statement (Check | | |
| Annual: The period covered in December 31, 2023. | - | Leaving Office: Date Left/(Check one circle.) |
| The period covered in December 31, 2023. | is, throu | of leaving office. |
| Assuming Office: Date assu | med | The period covered is/, through the date of leaving office. |
| Candidate: Date of Election | and office so | ought, if different than Part 1: |
| . Schedule Summary (requ | uired) ► Total num | nber of pages including this cover page: 1 |
| Schedules attached | | |
| Schedule A-1 - Investment | n sahadula attachad | Schedule C - Income, Loans, & Business Positions - schedule attached |
| Schedule A-2 - Investment | | Schedule D - Income - Gifts - schedule attached |
| Schedule B - Real Propert | | Schedule E - Income - Gifts - Travel Payments - schedule attached |
| La conocaro a mountroport | , contracts attached | |
| or- None - No reportable | e interests on anv schedule | |
| . Verification | , | |
| MAILING ADDRESS STREE | T CITY | Y STATE ZIP CODE |
| (Business or Agency Address Recommended | | 0.000 |
| 9150 Union Park Way | EIK | C Grove CA 95624 |
| | | |
| (916) 687-3070 | n in propering this statement. I have | aneronde@elkgrovepd.org |
| herein and in any attached schedu | les is true and complete. I acknowle | |
| I certify under penalty of perjury | under the laws of the State of Ca | alifornia that the foregoing is true and correct. |
| Date Signed 02/19/2024 | | Signature all lung |
| | day year | (File the originally signed paper statement with your filing official.) |