

COVER PAGE

Filed Date: 03/17/2024 01:24 PM  
SAN: FPPC

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Suen Darren Guy

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Elk Grove

CITY CLERK'S OFFICE  
MAR 22 2024 PM 03:19

Division, Board, Department, District, if applicable

Your Position

City Council Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: SEE ATTACHED LIST

Position: \_\_\_\_\_

2. Jurisdiction of Office (Check 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 at least one box)

Annual: The period covered is January 1, 2023, through  
December 31, 2023.

Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle.)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
December 31, 2023.

The period covered is January 1, 2023, through the date  
of leaving office.

Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
the date of leaving office.

Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary (required)

► Total number of pages including this cover page: 3

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 attached

Schedule E - Income – Gifts – Travel Payments – schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
8401 Laguna Palms Way Elk Grove CA 95758-8045  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
( 916 ) 478-2201 dsuen@elkgrovecity.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 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 03/17/2024 01:24 PM  
(month, day, year)

Signature Darren Guy Suen  
(File the originally signed paper statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE ATTACHMENT

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name Darren Suen

EXPANDED STATEMENT LIST

Agency Name	Division, Board, Department, District	Position or Title	Jurisdiction	Type of Statement	Period Covered
Assembly Staff		Chief of Staff	State California	Annual	07/04/23 - 12/31/23

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.



▶ NAME OF BUSINESS ENTITY  
Moderna, Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Healthcare

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
\_\_\_\_\_

GENERAL DESCRIPTION OF THIS BUSINESS  
\_\_\_\_\_

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
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GENERAL DESCRIPTION OF THIS BUSINESS  
\_\_\_\_\_

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

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ACQUIRED      DISPOSED

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GENERAL DESCRIPTION OF THIS BUSINESS  
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FAIR MARKET VALUE  
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IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
ACQUIRED      DISPOSED

**Filer's Verification**

Print Name Darren Suen

Office, Agency or Court City of Elk Grove

Statement Type  2023/2024 Annual       Assuming       Leaving  
 \_\_\_\_\_ Annual       Candidate  
(yr)

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

Date Signed 03/17/2024 01:24 PM  
(month, day, year)

Filer's Signature Darren Guy Suen

Comments: \_\_\_\_\_