

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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| Please type or print in ink. | | | | OCT 17 2024 PMO1:5 | |
|--|---|--------------------|---|-----------------------------------|--|
| NAME OF FILER (LAST) | (FIRST) | | (MIDDLE) | | |
| Yoshimura | Lana | | Υ | | |
| 1. Office, Agency, or Court | | | | | |
| Agency Name (Do not use acronym | s) | | | | |
| City of Elk Grove | | | ** | | |
| Division, Board, Department, District, if applicable | | Yo | Your Position | | |
| City Manager's Office | | C | Community Center Manager | | |
| ► If filing for multiple positions, list b | pelow or on an attachment. (Do no | ot use acronym | s) ((| | |
| | | | | | |
| Agency: | | Р | osition: | | |
| 2. Jurisdiction of Office (Chec | ck at least one box) | | | | |
| State | m 41 10 4 01 0110 1 4 01 | П. | udge, Retired Judge, Pro Tem Ju | dae or Court Commissioner | |
| | | | Statewide Jurisdiction) | ago, or obtain bolimilionolion | |
| Multi-County | | | County of | | |
| City of Elk Grove | | | Other | | |
| e ony or | | | | | |
| 3. Type of Statement (Check a | t least one box) | | 44 | 1 2024 | |
| Annual: The period covered is December 31, 2023. | January 1, 2023, through | | Leaving Office: Date Left(Check one | 1 2024 c circle.) | |
| -or- The period covered is December 31, 2023. | , throu | - | ☐ The period covered is Januar of leaving office. | | |
| Assuming Office: Date assum | ed |) | The period covered is the date of leaving office. | 01 2024 through | |
| Candidate: Date of Election _ | and office so | ought, if differen | t than Part 1: | | |
| A Cabadula Cumman / ranui | | | | | |
| 4. Schedule Summary (requi | red) ► Total num | ber of page | s including this cover pag | ge: | |
| Schedules attached | | | | | |
| Schedule A-1 - Investments | schedule attached | | e C - Income, Loans, & Business | | |
| Schedule A-2 - Investments – schedule attached Schedule B - Real Property – schedule attached Schedule B - Income – Gifts – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached | | | | | |
| Schedule B - Real Property | schedule attached | Scnedu | е E - Income — Giπs — Travel Pa | yments – schedule attached | |
| OF Mone No reportable | interests on any ashadula | | | | |
| -or- None - No reportable | interests on any schedule | | | | |
| 5. Verification | CIT | , | STATE | ZIP CODE | |
| MAILING ADDRESS STREET (Business or Agency Address Recommended - | Public Document) | T | SIAIE | ZIF CODE | |
| 8401 Laguna Palms Way | Elk | Grove | CA | 95758 | |
| DAYTIME TELEPHONE NUMBER | | EMAIL ADD | | | |
| (916) 627-3214 Iyoshimura@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 schedule | | | | owieuge the information contained | |
| I certify under penalty of perjury u | inder the laws of the State of Ca | lifornia that th | e foregoing is true and correct. | | |
| B (0) Ostabar 17 202 | 4 | 01 | 70 | 9 | |
| Date Signed October 17, 2024 | | Signature | (File the originally signed paper state | ement with your filing official.) | |
| | | | | | |