STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

13-JANUARY-2025

Ple	ease type or print in ink.		
	ME OF FILER (LAST)	(FIRST)	(MIDDLE)
Le	eaver	Shawn	Thomas
1.	Office, Agency, or Court		
	Agency Name (Do not use acronyms) City of Elk Grove		
	Division, Board, Department, Distric	t, if applicable	Your Position
	Police Department		Dispatch Supervisor
► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)		use acronyms)	
	Agency:		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.	3. Type of Statement (Check at least one box)		
	Annual: The period covered December 31, 2024.	s January 1, 2024, through	Leaving Office: Date Left// (Check one circle below.)
	-or- The period covered December 31, 2024.	is/, throug	h The period covered is January 1, 2024, through the date of leaving office.
	Assuming Office: Date assu	med//	The period covered is/, through the date of leaving office.
	Candidate: Date of Election	and office sou	ght, if different than Part 1:
4. Schedule Summary (required)			
	Schedules attached		
	Schedule A-1 - Investment	s – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
	Schedule A-2 - Investment	s – schedule attached	Schedule D - Income – Gifts – schedule attached
	Schedule B - Real Propert	/ - schedule attached	Schedule E - Income – Gifts – Travel Payments – schedule attached
-or- Vone - No reportable interests on any schedule			
	Verification	,	
	MAILING ADDRESS STREE (Business or Agency Address Recommended)		STATE ZIP CODE
	8401 Laguna Palms Way	,	Grove CA 95758
	DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS
	(916) 478-8156		sleaver@gmail.com
	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 1/12/2025		Signature Shawn Leaver Digitally signed by Shawn Leaver Date: 2025.01.12 19:12:32 -08'00'
		lay, year)	(File the originally signed paper statement with your filing official.)