

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT**

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Please type or print in ink.

NAME OF FILER (LAST) LONG (FIRST) CECILIA (MIDDLE) A.

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms) CITY OF EIK GROVE  
 Division, Board, Department, District, if applicable \_\_\_\_\_ Your Position FINANCE & Budget Analyst II

▶ If filing for multiple positions, list below or on an attachment. (Do not 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 EIK GROVE  Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

**Annual:** The period covered is January 1, 2024, through December 31, 2024.  **Leaving Office:** Date Left \_\_\_\_\_ (Check one circle below.)  
 -or- The period covered is \_\_\_\_\_, through December 31, 2024.  The period covered is January 1, 2024, 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: 1

**Schedules attached**

Schedule A-1 - Investments – schedule attached  
 Schedule A-2 - Investments – schedule attached  
 Schedule B - Real Property – schedule attached  
 Schedule C - Income, Loans, & Business Positions – schedule attached  
 Schedule D - Income – Gifts – 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 EIK GROVE CA 95758  
 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
(916) 627-3334 CLONG@EIKgrovecity.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 1/8/2025  
 (month, day, year)

Signature Cecilia Long  
 (File the original signed paper statement with your filing official.)