

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

UNIC DOCUMENT

A PUBLIC DOCUMENT

Filed Date: 01/27/2025 01:05 PM SAN: FPPC

Date Initial Filing Received
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NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	CITY CLERK'S	NFFICE	
O'con	Oscar			JAN 27 2025 i	M01:11	
1. Office, Agency, or Court	t					
Agency Name (Do not use acror						
City of Elk Grove						
Division, Board, Department, Dist	rict, if applicable	Your Positi	ion ·		-	
#/		Plannin	g Commissioner			
► If filing for multiple positions, !	ist below or on an attachment. (Do		9			
	·					
Agency:		Position:	Position:			
2. Jurisdiction of Office	hock at least one hov)					
	meek at least one boxy	□ ludgo P	toticad ludga Pro Tom	Judgo or Court Commi	ecioner	
State			 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) 			
☐ Multi-County		County o	of			
V City of Flk Grove			☐ County of			
N Only of Line Olovo						
3. Type of Statement (Chec	k 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 December 31, 202	d is, th 4.	rough -	period covered is Januing office.	uary 1, 2024, through the	e date of	
Assuming Office: Date assumed/ The period covered is/ the date of leaving office.					, through	
Candidate: Date of Election	and office	sought, if different than P	art 1:			
4. Schedule Summary (red	quired) ► Total nu	ımber of pages inclu	uding this cover p	page: 1		
Schedules attached				-		
Schadule A-1 - Investme	nts – schedule attached	☐ Schedule C - In	come, Loans, & Busine	ess Positions – schedule	attached	
	Schedule A-1 - Investments – 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				tached		
	,	_				
-or- ⊠ None - No reportab	ole interests on any schedule					
5. Verification						
MAILING ADDRESS STRE		CITY	STATE	ZIP CODE		
8401 Laguna Palms Way	,	Elk Grove	CA	95758-8045	(*)	
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS				
(916)478-2286						
	ce in preparing this statement. I had			knowledge the information	on contained	
I certify under penalty of perju	ry under the laws of the State of	California that the forego	oing is true and corre	ect.		
Date Signed 01/27/20	025 01:05 PM	Signature	Osca	ır O'con		
2210 0191100	h day year)		(File the originally signed papers			