FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

09-JANUARY-2025

| Ple | ease type or print in ink. | | | | | | |
|---|--|------------------|--|--|---|----------------------------------|--|
| NAM | ME OF FILER (LAST) | (FIRST) | | | (MIDDLE) | | |
| R | amirez | Justin | | | М | | |
| 1. | Office, Agency, or Court | | | | | | |
| | Agency Name (Do not use acronyr | ns) | | | | | |
| | City of Elk Grove | | | | | | |
| | Division, Board, Department, District | t, if applicable | | Your Position | | | |
| | Information Services | | | Senior IT Analyst | | | |
| | ► 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 | County of | | |
| | | | | | | | |
| 3. | Type of Statement (Check | | | | | | |
| | 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 December 31, 2024. | s// | _, through | | riod covered is January office. | 1, 2024, through the date of | |
| | Assuming Office: Date assur | ned// | | The pe | eriod covered is/_ | , through | |
| | Candidate: Date of Election and office sought, if different than Part 1: | | | | | | |
| 4. | Schedule Summary (required) | | | | | | |
| | Schedules attached | | | | | | |
| Schedule A-1 - Investments – schedule attached Schedule C | | | | | me, Loans, & Business | Positions – schedule attached | |
| | | | | Schedule D - Inco | hedule D - Income - Gifts - schedule attached | | |
| Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – | | | | | me – Gifts – Travel Payl | ments - schedule attached | |
| | | | | | | | |
| -or- V None - No reportable interests on any schedule | | | | | | | |
| 5. | Verification | | | | | | |
| | MAILING ADDRESS STREET (Business or Agency Address Recommended | | CITY | | STATE | ZIP CODE | |
| | 8401 Laguna Palms Way | | Elk Gro | | CA | 95758 | |
| | DAYTIME TELEPHONE NUMBER | | | EMAIL ADDRESS | | | |
| (916) 478-8115 jmramirez@elkgrovepd.org I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my know | | | | | | wledge 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. | | | | | | |
| | | | | | gitally signed by Justin Ramirez te: 2025.01.09 08:02:23 -08'00' | | |
| | (month, day, year) (File the originally signed paper statement with | | | | | | |