

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

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Please type or print in ink.

NAME OF FILER (LAST) Rueda (FIRST) Carlos (MIDDLE)

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

Agency Name (Do not use acronyms) City of Elk Grove

Division, Board, Department, District, if applicable Public Works Your Position Drainage Supervisor

▶ 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
- Multi-County \_\_\_\_\_
- City of Elk Grove
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- 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.)
- The period covered is January 1, 2024, through the date of leaving office.
- or-** The period covered is \_\_\_\_\_, through \_\_\_\_\_.
- Assuming Office:** Date assumed \_\_\_\_\_
- 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)  
10250 Iron Rock Way Elk Grove CA 95624

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
(916) 687-3018 crueda@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 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 1/8/25  
(month, day, year)

Signature Carlos Rueda  
(File the originally signed paper statement with your filing official.)