CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

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Filed Date: 01/07/2025 01:29 PM SAN: FPPC

NAME OF FILER (LAST)	(FIRST)	11	(MIDDLE	e) city clerk's (FFICE .			
Singha	Suman			JAN 07 2025 P				
1. Office, Agency, o	or Court							
Agency Name (Do no	t use acronyms)							
City of Elk Grove								
Division, Board, Depart	tment, District, if applicable	90	Your Position					
			Planning Commissione	er				
► If filing for multiple	ole positions, list below or on an attachment. (Do not use acronyms)							
Agency:			Position:					
2 Jurisdiction of (Office (Check at least one box)							
	Office (Check at least one box)	۲	Judge, Retired Judge, Pro Te	am Judge or Court Comm	ssioner			
State		L	(Statewide Jurisdiction)	an Juage, or Court Comm	33101101			
Multi-County			County of					
X City of Elk Grov	/e		Other					
3. Type of Stateme	ent (Check at least one box)							
	iod covered is January 1, 2024, through		Leaving Office: Date Left	ne circle below.)	-			
-Or-	er 31, 202 4.		○ The period covered is Ja		e date of			
	iod covered is/ er 31, 202 4.	_, through	leaving office.					
Assuming Office	: Date assumed		The period covered is the date of leaving office		, through			
Candidate: Date	of Election and of	ffice sought, if diffe	rent than Part 1;					
4. Schedule Summ	nary (required) ► Total	number of pa	ges including this cover	r page: 2				
Schedules atta	ched			1				
Schodulo A 1	- Investments – schedule attached	┌ Sche	dule C - Income, Loans, & Bus	iness Positions – schedule	attached			
_	- Investments - schedule attached	Schedule D - Income - Gifts - schedule attached						
_	Real Property - schedule attached	Sche	dule E - Income – Gifts – Trave	<i>el Payments</i> – schedule a	tached			
-or- 🗆 None - No	reportable interests on any sched	ule						
5. Verification		ia .						
MAILING ADDRESS	STREET s Recommended - Public Document)	CITY	STATE	ZIP CODE				
8401 Laguna Pa		Elk Grove	CA	95758-8045				
DAYTIME TELEPHONE NUM		EMAIL.	ADDRESS					
(916)478-228			gren@elkgrovecity.org		×			
I have used all reasona herein and in any atta	able diligence in preparing this statement. ched schedules is true and complete. I ad	I have reviewed thi knowledge this is	s statement and to the best of magnetic apublic document.	ny knowledge the informati	on contained			
	y of perjury under the laws of the State			rrect.				
Date Signed	01/07/2025 01:29 PM	Signatur	e Sum	an Singha				
Date Signed	(month, day, year)	0.5		per statement with your filing official.)				

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized. Do not attach brokerage or financial statements.

CAL	IFORNIA FOR	м 7	00
FAIR	POLITICAL PRACTIC	ES CON	IMISSION
NI ST			

Suman Singha

	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
	Carnival Cruise Lines		
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS	7
	Cruising*		
	FAIR MARKET VALUE	FAIR MARKET VALUE	-
	▼ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000	
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000	
	NATURE OF INVESTMENT	NATURE OF INVESTMENT	
	X Stock Other (Describe)	Stock Other (Describe)	
	Partnership O Income Received of \$0 - \$499	Partnership Olncome Received of \$0 - \$499	
	☐ Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule	C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
	24	24	
_			_
	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
			_
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS	
	FAIR MARKET VALUE	FAIR MARKET VALUE	
	\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000	
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000	
	NATURE OF INVESTMENT	NATURE OF INVESTMENT	
	NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other	
	(Describe)	(Describe)	
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule	<u></u>
	Theome Received of \$500 of More (Report on Scriedule C)	Through Received of \$500 of More (Report oil Schedule	رب
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED	
<u> </u>	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	_
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS	70.0
	SEINER RESERVENTION OF THIS SECOND SE		
		 	
	FAIR MARKET VALUE	FAIR MARKET VALUE	
	\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \qquad \qquad \$10,001 - \$100,000	
	\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000	
	NATURE OF INVESTMENT	NATURE OF INVESTMENT	
	Stock Other (Describe)	Stock Other (Describe)	
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499	
	Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule	C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
	<u></u>		
	ACQUIRED DISPOSED	ACQUIRED DISPOSED	
_	* Acquired 03/17/2021		
Co	omments: Negariou 00/17/2021		í