



STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Cooper **Kimberly** **Ann**

1. Office, Agency, or Court

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

Division, Board, Department, District, if applicable Your Position
Finance Department **Purchasing Agent**

► 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 **Elk Grove** Other _____

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

Annual: The period covered is January 1, **2020**, through December 31, **2020**.

-or- The period covered is _____, through December 31, **2020**.

Assuming Office: Date assumed _____

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

Leaving Office: Date Left **08** / **30** / **2021**
(Check one circle.)

The period covered is January 1, **2020**, through the date of leaving office.

-or- The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: **1**

Schedules attached

Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - 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

-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
<i>(Business or Agency Address Recommended - Public Document!)</i>				
8401 Laguna Palms Way		Elk Grove	CA	95758
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
(916) 478-3670		kacooper@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 8/21/21 Signature Kimberly Cooper
(month, day, year) (File the originally signed paper statement with your filing official.)

Print **Clear**