

**COVER PAGE**

**CITY CLERK'S OFFICE**  
**MAR 02 2020 PM04:44**

**A PUBLIC DOCUMENT**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
**Aguilar Luis Gabriel**

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

Agency Name (Do not use acronyms)  
**City of Elk Grove**  
 Division, Board, Department, District, if applicable Your Position  
**Economic Development Economic Development Specialist**

► 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, 2019, through December 31, 2019.  
 -or- The period covered is \_\_\_\_\_, through December 31, 2019.  
 Assuming Office: Date assumed \_\_\_\_\_  
 Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1 \_\_\_\_\_  
 Leaving Office: Date Left \_\_\_\_\_ (Check one circle.)  
 The period covered is January 1, 2019, through the date of leaving office.  
 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**

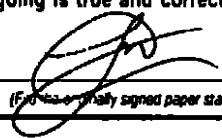
**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
 (Business or Agency Address Recommended - Public Document)  
**8401 Laguna Palms Way Elk Grove CA 95758**  
 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
**( 916 ) 627-3212 laguilar@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 03/02/2020  
 (month, day year)

Signature   
 (If not a fully signed paper statement with your filing official)