

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

Date Initial Filing Received  
*Filing Official Use Only*

CITY CLERK'S OFFICE  
JAN 21 2021 PM 12:25

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Hill Chris B

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

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

► 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 \_\_\_\_\_  
*(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  
*(Business or Agency Address Recommended - Public Document)*  
8400 Laguna Palms Way Elk Grove CA 95816  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 916 ) 627-3301 chill@elkgrovepd.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 01/13/21 Signature   
*(month, day, year)* *(File the originally signed paper statement with your filing official.)*