

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Kile Michelle Lynn

1. Office, Agency, or Court

Agency Name (Do not use acronyms) City of Elk Grove Council member Dist # 2
Division, Board, Department, District, if applicable Your Position

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Elk Grove City Position: Council member Dist # 2

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, 2021, through December 31, 2021.
- Leaving Office: Date Left ____/____/____ (Check one circle.)
- Assuming Office: Date assumed ____/____/____
- The period covered is January 1, 2021, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.
- Candidate: Date of Election Nov 8, 2022 and office sought, if different than Part 1: _____

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)
[Redacted] Elk Grove CA 95624
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
[Redacted] michellekile2020@yahoo.com

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 8/10/22 (month, day, year)

Signature [Signature] (File the originally signed paper statement with your filing official.)

Print

Clear