

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please ty	pe or print in ink.						
· ·		(FIRST)			(MIDDLE)		
Bolfang	<b>J</b> O	Jason			Napoleor	1	
1. Offic	e, Agency, or Court						
Agenc	y Name (Do not use acronyms)						
Elk (	Grove Police Department						
Divisio	on, Board, Department, District, if	applicable		Your Position	1	-	
Patro	ol				Patrol Watch Commander		
▶ If fi	If filing for multiple positions, list below or on an attachment. (Do not use acronyms)						
Agend	cy:	Position:					
2. Juris	sdiction of Office (Check	at least one box)					
Sta	ate				ired Judge, Pro Tem Jud Jurisdiction)	lge, or Court Commissioner	
Mu	ulti-County			County of			
Cit	<sub>ty of</sub> Elk Grove			Other			
•	e of Statement (Check at i	•					
<b></b>	nnual: The period covered is Ja December 31, 2022.	nuary 1, 2022, through		Leaving (	Office: Date Left (Check one		
	The period covered is _ December 31, 2022.		through		eriod covered is January g office.	1, 2022, through the date of	
A	ssuming Office: Date assumed		-		eriod covered is/. te of leaving office.	, through	
c	andidate: Date of Election	and office	ce sought, if	lifferent than Part	i 1 <u>p</u>		
4. Sch	Schedule Summary (required)   Total number of pages including this cover page:						
Sch	edules attached					-	
	Schedule A-1 - Investments -	schadula attached	s	chedule C - Inco	me. Loans. & Business	Positions - schedule attached	
	Schedule A-2 - Investments -				me – Gifts – schedule a		
	Schedule B - Real Property -		s	chedule E - Inco	me – Gifts – Travel Pay	ments - schedule attached	
here)	- Today Popoliy	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
-or-	None - No reportable in	terests on any schedu	le				
5. Verif	<u> </u>						
	G ADDRESS STREET		CITY		STATE	ZIP CODE	
,	ess or Agency Address Recommended - Po	iblic Document)	EII 0 .		04	05750	
	0 Laguna Palms Way ME TELEPHONE NUMBER		Elk Grove	AIL ADDRESS	CA	95758	
2357255714773			7.5		around ora		
100 miles	(916 ) 639-6714 jbolfango@elkgrovepd.org 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	erein and in any attached schedules is true and complete. I acknowledge this is a public document.						
l certi	ify under penalty of perjury und	ier the laws of the State o	ot California	that the foregoir	ng is true and correct.		
Date S	Signed 2/21/2023		Sign		in Dotter		
	(month, day, y	aer)		\ (Fil	e the originally signed paper state	ment with your filing official.)	