

COVER PAGE  
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NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Griffin John Raymond

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
City of Elk Grove  
Division, Board, Department, District, if applicable  
Department of Public Works  
Your Position  
Senior Civil Engineer

► 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
- Multi-County \_\_\_\_\_
- City of Elk Grove
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- 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  
-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 A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

5. Verification

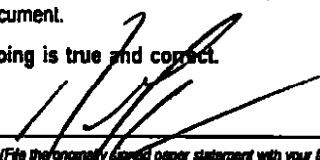
MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
8401 Laguna Palms Way Elk Grove CA 95758

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 916 ) 627-3341 jgriffin@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 February 28, 2020  
(month, day, year)

Signature   
(File the original signed paper statement with your filing official)