

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

Date Initial Filing Received  
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Please type or print in ink.

NAME OF FILER (LAST) Rueda (FIRST) Carlos (MIDDLE)

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

Agency Name (Do not use acronyms) City of Elk Grove  
 Division, Board, Department, District, if applicable O&M Public Works Your Position Drainage & Collections Supervisor  
 ▶ 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 City of Elk Grove  Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

**Annual:** The period covered is January 1, 2022, through December 31, 2022.  
 -or- The period covered is \_\_\_\_\_, through December 31, 2022.  
 **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, 2022, through the date of leaving office.  
 -or-  
 The period covered is \_\_\_\_\_, through the date of leaving office.

**4. Schedule Summary (required)**

▶ 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)  
10250 Iron Rock Way Elk Grove CA 95624  
 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
916 1687-3018 Crueda@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 1/10/23 Signature Carlos Rueda  
 (month, day, year) (File the originally signed paper statement with your filing official.)