

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

Date Initial Filing Received  
*Filing Official Use Only*  
**CITY CLERK'S OFFICE**  
JAN 15 2021 AM 10:06

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Albright	Timothy	Clark

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

Agency Name (Do not use acronyms)  
City of Elk Grove

Division, Board, Department, District, if applicable  
Police Department

Your Position  
Chief of Police

► 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)**

<input type="checkbox"/> State	<input type="checkbox"/> Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input type="checkbox"/> County of _____
<input checked="" type="checkbox"/> City of <u>Elk Grove</u>	<input type="checkbox"/> Other _____

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

<input checked="" type="checkbox"/> <b>Annual:</b> The period covered is January 1, 2020, through December 31, 2020.	<input type="checkbox"/> <b>Leaving Office:</b> Date Left ____/____/____ (Check one circle.)
<b>-or-</b> The period covered is ____/____/____, through December 31, 2020.	<input type="checkbox"/> The period covered is January 1, 2020, through the date of leaving office.
<input type="checkbox"/> <b>Assuming Office:</b> Date assumed ____/____/____	<b>-or-</b> <input type="checkbox"/> The period covered is ____/____/____, through the date of leaving office.
<input type="checkbox"/> <b>Candidate:</b> Date of Election _____ and office sought, if different than Part 1: _____	

**4. Schedule Summary (must complete) ► Total number of pages including this cover page: \_\_\_\_\_**

**Schedules attached**

<input type="checkbox"/> <b>Schedule A-1 - Investments</b> – schedule attached	<input type="checkbox"/> <b>Schedule C - Income, Loans, &amp; Business Positions</b> – schedule attached
<input type="checkbox"/> <b>Schedule A-2 - Investments</b> – schedule attached	<input type="checkbox"/> <b>Schedule D - Income – Gifts</b> – schedule attached
<input type="checkbox"/> <b>Schedule B - Real Property</b> – schedule attached	<input type="checkbox"/> <b>Schedule E - Income – Gifts – Travel Payments</b> – schedule attached

**-or-  None - No reportable interests on any schedule**

**5. Verification**

MAILING ADDRESS <i>(Business or Agency Address Recommended - Public Document)</i>	STREET	CITY	STATE	ZIP CODE
8400 Laguna Palms Drive	Elk Grove	CA	95758	
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS			
( 916 ) 478-8042	talbright@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 01/12/2021  
*(month, day, year)*

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