

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

Date Initial Filing Received
Filing Official Use Only

**CITY CLERK'S OFFICE
MAR 18 2022 PM02:11**

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
DILLER	SHANE	G

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
CITY OF ELK GROVE

Division, Board, Department, District, if applicable
DEVELOPMENT SERVICES

Your Position
ASSISTANT DIRECTOR

► 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, 2021, through December 31, 2021.
- Assuming Office:** Date assumed _____
- Candidate:** Date of Election _____ and office sought, if different than Part 1: _____
- Leaving Office:** Date Left 4 / 8 / 2022
(Check one circle.)
- The period covered is January 1, 2021, through the date of leaving office.
- 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**

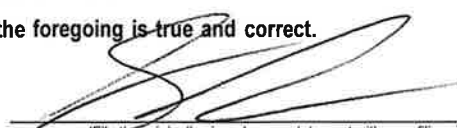
5. Verification

MAILING ADDRESS (Business or Agency Address Recommended - Public Document)	STREET	CITY	STATE	ZIP CODE
8401 LAGUNA PALMS WAY	ELK GROVE	CA	95758	
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS			
(916) 687-3002	sdiller@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 3/18/2022
(month, day, year)

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