

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

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Please type or print in ink.					
NAME OF FILER (LAST) (FIRST)				(MIDDLE)	
P	ress M	ichael			
1.	Office, Agency, or Court				**
	Agency Name (Do not use acronyms)				***
	Elk Grove Police Department				
	Division, Board, Department, District, if applicable		Your 1	Position	
			Lieu	tenant	
	If filing for multiple positions liet below or on an effe	itions list below or on an attachment. (Do not use acronyms)			
	If filing for multiple positions, list below or on an attachment. (Do not use acronyms)				
	Agency:		Posit	ion:	
<u>-</u>	Jurisdiction of Office (Check at least one bo				
	State	,	.lude	ne Retired Judge Pro Tem Ju	udge, or Court Commissioner
	State			ewide Jurisdiction)	adgo, or oddit odminiodonio.
	Multi-County		Cou	ntv of	
	City of Elk Grove				
	City 81		Out		
3.	Type of Statement (Check at least one box)				
	Annual: The period covered is January 1, 2021, in December 31, 2021.	through	Lea	aving Office: Date Left (Check on	
	The period covered is/	, through	-or-	The period covered is Janua leaving office.	ry 1, 2021, through the date of
	Assuming Office: Date assumed		-01-	The period covered is the date of leaving office.	, through
	Candidate: Date of Election	and office cought	if different th	an Dart 1	
	Candidate. Date of Election	_ and office sought,	ii diliciciii ai	an rait is	
4.	Schedule Summary (must complete)	► Total number	of pages	ncluding this cover pa	ige:
	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				attached
Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule				ayments – schedule attached	
	Constitution of the consti				
-or- None - No reportable interests on any schedule					
5. Verification					
٥.	MAILING ADDRESS STREET	CITY		STATE	ZIP CODE
	(Business or Agency Address Recommended - Public Document)			0.4	05750
	8380 Laguna Palms Way	Elk Gro	OVE TEMAIL ADDRES	CA	95758
	AYTIME TELEPHONE NUMBER		mpress@elkgrovepd.org		
				reviedes the information contained	
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the in herein and in any attached schedules is true and complete. I acknowledge this is a public document.					nowledge the information contained
	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
	Data Signed 01/17/2022	_		An Mill X	1
	Date Signed U1/11//2022 (month, day, year)	S	ignature	(File the originally signed paper sta	element with your filing official.)