## CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

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Ple	ease type or print in ink.					
NAI	ME OF FILER (LAST)	(FIRST)		(MIC	DLE)	***
S	OLOMON	PAUL		JE	ROME	
1.	Office, Agency, or Court					
Agency Name (Do not use acronyms)						
	ELK GROVE POLICE DE	PARTMENT				
	Division, Board, Department, District	ision, Board, Department, District, if applicable		Your Position		
				ASSISTANT CHIEF		
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)						
	Agency:			Position:		
<del>_</del> 2.	Jurisdiction of Office (ch	eck at least one box)				- Ja
	State		Ē	Judge, Retired Judge, Pro (Statewide Jurisdiction)	Tem Judge, or Court Comr	nissioner
	Multi-County			County of		
	City of ELK GROVE					
<del></del> 3.	Type of Statement (Check	at least one box)				
	December 31, 2021.	rered is January 1, 2021, through 2021.		Leaving Office: Date Left/(Check one circle.)		
	-or- The period covered December 31, 2021.	is/	_, through	leaving office.	January 1, 2021, through t	he date of
	Assuming Office: Date assu			The period covered is the date of leaving of	i/	_, through
	Candidate: Date of Election	and c	office sought, if differ	ent than Part 1:		
4	Schedule Summary (must complete) > Total number of name including this course 2					
Τ.	Schedule Summary (must complete) ► Total number of pages including this cover page: 2  Schedules attached					
	Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached					le 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				attached	
-0	or- None - No reportable	e interests on any sche	dula			
	Verification	microsic on any conoc	10.0			
	MAILING ADDRESS STREE' (Business or Agency Address Recommended)		CITY	STATE	ZIP CODE	
	8400 LAGUNA PALMS W	•	ELK GROVE	CA	95758	
	DAYTIME TELEPHONE NUMBER			DDRESS		
	( 916 ) 627-3724	916 ) 627-3724 psolomon@elkgrovepd.org				
		ave used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained rein and in any attached schedules is true and complete. I acknowledge this is a public document.				
	i certify under penalty of perjury	ertify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
	Date Signed 4/2	27/22	Signatur	the		
		tay, year)			paper statement with your filing official.	)

## **SCHEDULE A-1 Investments**

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized. Do not attach brokerage or financial statements. CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

Paul Solomon

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
The Home Depot, Inc			
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
Home improvement			
FAIR MARKET VALUE	FAIR MARKET VALUE		
<b>\$2,000 - \$10,000 \$10,001 - \$100,000</b>	\$2,000 - \$10,000 \$10,001 - \$100,000		
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
Stock Other (Describe)	Stock Other(Describe)		
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
ACQUIRED DISPOSED	ACQUIRED DISPOSED		
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
FAIR MARKET VALUE	FAIR MARKET VALUE		
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000		
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
Stock Other	Stock Other		
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
ACQUIRED DISPOSED	ACQUIRED DISPOSED		
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
FAIR MARKET VALUE	FAIR MARKET VALUE		
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000		
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
Stock Other	Stock Other(Describe)		
(Describe)  Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
/ /21/_ /21			
ACQUIRED DISPOSED	ACQUIRED DISPOSED		
l <sub>e</sub>			

Comments: