

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

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**CITY CLERK'S OFFICE
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Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Whitlock	Carrie	Anne

1. Office, Agency, or Court

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

Division, Board, Department, District, if applicable
City Manager's Office

Your Position
Strategic Planning & Innovation Program Mgr

► 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 _____ Other _____

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

Annual: The period covered is January 1, 2021, through December 31, 2021.

Leaving Office: Date Left ____/____/_____
(Check one circle.)

The period covered is January 1, 2021, through the date of leaving office.

Assuming Office: Date assumed ____/____/_____
-or- The period covered is ____/____/_____, through December 31, 2021.

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

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

<input type="checkbox"/> Schedule A-1 - Investments – schedule attached	<input type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached
<input type="checkbox"/> Schedule A-2 - Investments – schedule attached	<input type="checkbox"/> Schedule D - Income – Gifts – schedule attached
<input type="checkbox"/> Schedule B - Real Property – schedule attached	<input type="checkbox"/> Schedule E - Income – Gifts – Travel Payments – 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
8401 Laguna Palms Way	Elk Grove	CA	95758	
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS			
(916) 478-2238	cwhitlock@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 2/14/2022
(month, day, year)

Signature  Digitally signed by Carrie Whitlock
Date: 2022.02.14 12:48:22 -08'00'
(File the originally signed paper statement with your filing official.)

Print **Clear**