

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

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01/10/2023

Please type or print in ink. NAME OF FILER (LAST) (FIRST) (MIDDLE) **MURPHY CASSANDRA** 1. Office, Agency, or Court Agency Name (Do not use acronyms) CITY OF ELK GROVE Division, Board, Department, District, if applicable Your Position POLICE DEPARTMENT POLICE ADMISTRATIVE MANAGER ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: __ 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 ELK GROVE Other 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2022, through Leaving Office: Date Left ____ December 31, 2022. (Check one circle.) -or-☐ The period covered is January 1, 2022, through the date of The period covered is ______, through leaving office. December 31, 2022. -or-The period covered is ____ __/___, through Assuming Office: Date assumed _____/____/ the date of leaving office. Candidate: Date of Election ____ _____ and office sought, if different than Part 1: _ 4. Schedule Summary (required) ► Total number of pages including this cover page: Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached **-or-** None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STATE ZIP CODE STREET CITY (Business or Agency Address Recommended - Public Document) 8400 LAGUNA PALMS WAY **ELK GROVE** CA 95758 DAYTIME TELEPHONE NUMBER **EMAIL ADDRESS** (916) 627-3302 CMURPHY@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 01/09/2022 Signature Cassandra Murphy Date: 2023.01.09 18:57:03 -08'00' (File the originally signed paper statement with your filing official.) (month, day, year)