## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please type or print in ink. (MIDDLE) NAME OF FILER (LAST) (FIRST) ANN NERONOF AUCIA 1. Office, Agency, or Court Agency Name (Do not use acronyms) OF ELK GROVE Division, Board, Department, District, if applicable Your Position ANIMAL SERVICES ANIMAL SERVICES ▶ 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) Judge, Retired Judge, Pro Tem Judge, or Court Commissioner State (Statewide Jurisdiction) Multi-County County of PCity of ELK GROVE 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.) -01-The period covered is January 1, 2022, through the date of The period covered is \_\_\_\_ leaving office. December 31, 2022. Assuming Office: Date assumed \_\_\_\_\_/\_\_\_ The period covered is \_\_\_ the date of leaving office. and office sought, if different than Part 1:\_\_\_ Candidate: Date of Election 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- \( \text{None} - No reportable interests on any schedule 5. Verification MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) 9150 UNION CA 95624 ELK GROVE DAYTIME TELEPHONE NUMBER ANERONOE@ELKGROVEPD. ORG (914) 657-3076 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. Signature **Date Signed** 

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