FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received Filing Official Use Only

02/21/2023

Please type or print in ink.							
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)				
Parsons	Kristin		Joi				
1. Office, Agency, or Co	ourt						
Agency Name (Do not use a	acronyms)						
City of Elk Grove	<b>N</b>		<b>D</b>				
Division, Board, Department,	District, if applicable	Y	our Position				
Public WOrks Departr	ment	I	Deputy Director of Public V	Vorks			
<ul> <li>If filing for multiple positio</li> </ul>	ns, list below or on an attachment.	(Do not use acronym	ns)				
Agency:		F	Position:				
2. Jurisdiction of Offic	Jurisdiction of Office (Check at least one box)						
State			Judge, Retired Judge, Pro Tem Ju (Statewide Jurisdiction)	ldge, or Court Commissioner			
Multi-County			County of				
City of Elk Grove			Other				
3. Type of Statement (	Check at least one box)						
December 31,	vered is January 1, <b>2022,</b> through <b>2022</b> .		Leaving Office: Date Left (Check one				
<b>-or-</b> The period cov December 31,	vered is//////	., through	<ul> <li>The period covered is Januar leaving office.</li> <li>-or-</li> </ul>	y 1, 2022, through the date of			
Assuming Office: Date	e assumed///	_	The period covered is the date of leaving office.	/, through			
Candidate: Date of Ele	ection and of	fice sought, if differe	nt than Part 1:				
4. Schedule Summary Schedules attached		number of pag	es including this cover pag	ge: _2			
Schedule A-1 - Investments – schedule attached Schedule C - Income, Loans, & Business Positions – schedule				s Positions – schedule attached			
	Schedule A-2 - Investments – schedule attached Schedule D - Income – Gifts – schedule attached						
Schedule B - Real P	Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached						
-or- 🗌 None - No repo	ortable interests on any sched	ulo					
5. Verification	ntable interests on any sched	uie					
MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE			
(Business or Agency Address Recon 8401 Laguna Palms		Elk Grove	СА	95758			
DAYTIME TELEPHONE NUMBER	vvay	EIK GIOVE EMAIL AD		90700			
(916 )478-2236		kpars	ons@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 p	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.						
Date Signed 02/21/2023	3	Signature		Digitally signed by Kristin Parsons Date: 2023.02.21 10:34:42 -08'00'			
	(month, day, year)		(File the originally signed paper stat	ement with your filing official.)			

## SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

►	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS		ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS			
	3 Calle Margarita	15 Calle Margarita				
	CITY Elk Grove, CA 95624		CITY			
			Elk Grove, CA 95624			
	FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000       ///22         \$10,001 - \$100,000       ///22         \$100,001 - \$1,000,000       ACQUIRED         Over \$1,000,000       DISPOSED		FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000			
	NATURE OF INTEREST	11 .	NATURE OF INTEREST			
	Ownership/Deed of Trust Easement		Ownership/Deed of Trust Easement			
	Leasehold Dther	[] [	Leasehold Dther			
			IF RENTAL PROPERTY, GROSS INCOME RECEIVED			
	IF RENTAL PROPERTY, GROSS INCOME RECEIVED           \$0 - \$499         \$500 - \$1,000         \$1,001 - \$10,000           \$10,001 - \$100,000         OVER \$100,000		\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000			
			\$10,001 - \$100,000 OVER \$100,000			
	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	i	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.			
*	You are not required to report loans from a commercia business on terms available to members of the public v loans received not in a lender's regular course of busin	witho	ut regard to your official status. Personal loans and			
	NAME OF LENDER*		NAME OF LENDER*			
ADDRESS (Business Address Acceptable)			ADDRESS (Business Address Acceptable)			
	BUSINESS ACTIVITY, IF ANY, OF LENDER		BUSINESS ACTIVITY, IF ANY, OF LENDER			
	INTEREST RATE TERM (Months/Years)		INTEREST RATE TERM (Months/Years)			
	% None		%  None			
	HIGHEST BALANCE DURING REPORTING PERIOD		HIGHEST BALANCE DURING REPORTING PERIOD			
	\$500 - \$1,000 \$1,001 - \$10,000		\$500 - \$1,000 \$1,001 - \$10,000			
	S10,001 - \$100,000 OVER \$100,000		S10,001 - \$100,000 OVER \$100,000			

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Guarantor, if applicable

Guarantor, if applicable

Comments: \_

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