

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
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NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Mejia, Amalia			

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF SANTA ANA

Division, Board, Department, District, if applicable

Your Position

COMMUNITY REDEVELOPMENT AND HOUSING COMMISSION

COMMISSIONER

► 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)

- | | |
|--|--|
| <input type="checkbox"/> State | <input type="checkbox"/> Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) |
| <input type="checkbox"/> Multi-County _____ | <input type="checkbox"/> County of _____ |
| <input checked="" type="checkbox"/> City of <u>Santa Ana</u> | <input type="checkbox"/> Other _____ |

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

- | | |
|--|---|
| <input type="checkbox"/> Annual: The period covered is January 1, 2022 through December 31, 2022. | <input checked="" type="checkbox"/> Leaving Office: Date Left <u>06 / 05 / 2023</u>
(Check one circle) |
| -or- | <input type="checkbox"/> The period covered is January 1, 2022 through the date of leaving office. |
| The period covered is ____/____/____, through December 31, 2022. | <input checked="" type="checkbox"/> The period covered is <u>02 / 22 / 2023</u> , through the date of leaving office. |
| <input type="checkbox"/> Assuming Office: Date assumed ____/____/____ | |
| <input type="checkbox"/> Candidate: Date of Election _____ and office sought, if different than Part 1: _____ | |

4. Schedule Summary (required)► 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	STREET	CITY	STATE	ZIP CODE
<i>(Business or Agency Address Recommended - Public Document)</i>				
		Santa Ana	CA	92704
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS			
()				

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 04/11/2024
 (month, day, year)

 Signature Amalia Mejia
 (File the originally signed paper statement with your filing official.)