

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

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RECEIVED
2021 FEB -4 PM 1:39
CITY OF WEST COVINA
PLANNING COMMISSION

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of West Covina

Division, Board, Department, District, if applicable

Your Position

Planning Commissioner

▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: West Covina Position: Planning Commissioner

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County _____
- City of West Covina
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual:** The period covered is January 1, 2020, through December 31, 2020.
-or- The period covered is ____/____/____, through December 31, 2020.
- Assuming Office:** Date assumed 01/26/2021
- Candidate:** Date of Election _____ and office sought, if different than Part 1: _____
- Leaving Office:** Date Left ____/____/____
(Check one circle.)
- The period covered is January 1, 2020, through the date of leaving office.
- or- The period covered is ____/____/____, through the date of leaving office.

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _____

Schedules attached

- Schedule A-1 - Investments** – schedule attached
- Schedule A-2 - Investments** – schedule attached
- Schedule B - Real Property** – schedule attached
- Schedule C - Income, Loans, & Business Positions** – schedule attached
- Schedule D - Income – Gifts** – schedule attached
- 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
(Business or Agency Address Recommended - Public Document)
1444 West Garvey Avenue West Covina CA 91790

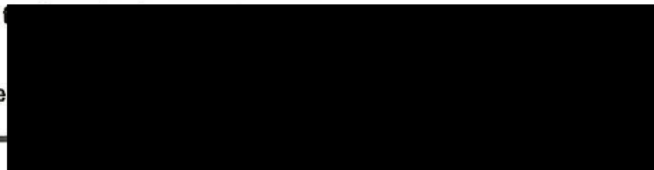
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(626) 939-8433

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

Date Signed January 28, 2021
(month, day, year)

Signature



PRINT CLEAR