

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE**
A PUBLIC DOCUMENT

RECEIVED
01-12-2026

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
RUIZ MATTHEW P

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
CITY OF ELK GROVE

Division, Board, Department, District, if applicable Your Position
FINANCE BUDGET ANALYST II

► 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)

- State
- Multi-County _____
- City of ELK GROVE
- Judge (Supreme, Appellate, Superior Court), 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, 2025, through December 31, 2025.
- Leaving Office:** Date Left ____/____/_____
(Check one circle below.)
- The period covered is January 1, 2025, through the date of leaving office.
- Assuming Office:** Date assumed ____/____/_____
-or- The period covered is ____/____/_____, through December 31, 2025.
- The period covered is ____/____/_____, through 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: 1

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
- Attachment 700-P - Prospective Employment (87200 Filers Only)** – 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)
8401 LAGUNA PALMS WAY ELK GROVE CA 95758

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(916) 691-2489 mruiz@elkgrove.gov

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 01/12/2026
(month, day, year)

Signature Matt Ruiz
Digitally signed by Matt Ruiz
Date: 2026.01.12 07:52:50 -08'00'
(File the originally signed paper statement with your filing official.)