STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received Filing Official Use Only

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Filed Date: 03/13/2023 11:40 AM SAN: 121700194-STH-0194

Please type or print in ink.			SAN: 12	1700194-STH-0194
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	
Tamagni	Stacey			
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)				
City of Folsom				
Division, Board, Department, District, if	applicable	Your Posit	ion	
Finance Department		Financ	e Director	
► If filing for multiple positions, list be	low or on an attachment. (Do not	use acronyms)		
	г			
Agency: SEE ATTACHED LIST		Position:		
2. Jurisdiction of Office (Check	at least one box)			
State			Retired Judge, Pro Tem Judge, le Jurisdiction)	or Court Commissioner
Multi-County		County c	of	
× City of Folsom		Other		
3. Type of Statement (Check at)	-			
Annual: The period covered is Ja December 31, 2022. -or-	anuary 1, 2022, through	L Leaving	g Office: Date Left/ (Check one circ	
The period covered is _ December 31, 2022 .	/, through		period covered is January 1, ing office.	2022 , through the date of
Assuming Office: Date assumed	1/		period covered is/ date of leaving office.	/, through
Candidate: Date of Election	and office soug	uht, if different than P	Part 1:	
4. Schedule Summary (require	ed) ► Total numb	er of pages incl	uding this cover page:	2
Schedules attached				
Schedule A-1 - Investments -	schedule attached	Schedule C - Ir	ncome, Loans, & Business Pos	sitions - schedule attached
Schedule A-2 - Investments –		Schedule D - Ir	ncome – Gifts – schedule attac	ched
Schedule B - Real Property –	schedule attached	Schedule E - In	ncome – Gifts – Travel Payme	nts - schedule attached
— N				
-or- 🗵 None - No reportable in	iterests on any schedule			
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended - P	ublic Document)		STATE	ZIP CODE
50 Natoma Street	Fols		CA 95	630
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
		stamagni@fc		
I have used all reasonable diligence in herein and in any attached schedules				dge the information contained
I certify under penalty of perjury un	der the laws of the State of Calif	ornia that the foreg	oing is true and correct.	
Date Signed 03/13/2023	11·40 AM	Signature	Stacey Tam	agni

Date Signed	03/13/2023 11:40 AIVI	Signature	Stacey Tamagni		
(month, day, year)			(File the originally signed paper statement with your filing official.)		

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COVER PAGE ATTACHMENT



EXPANDED STATEMENT LIST

Agency Name	Division, Board, Department, District	Position or Title	Jurisdiction	Type of Statement	Period Covered
City of Folsom	Finance Department	Chief Financial Officer	City of Folsom	Annual	01/01/22 - 12/31/22