

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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| Please type or print is | n ink. | | | | SAN. I FFC |
|--|--|--------------------|---------------------|--|---------------------------------|
| NAME OF FILER (LAST) | (FIRST) | | | (MIDDLE) | |
| Mollenkopf | Kristi | ne | | | |
| 1. Office, Agency | y, or Court | | | | |
| Agency Name (Do | not use acronyms) | | | | |
| City of Lincoln | ı | | | | |
| Division, Board, De | epartment, District, if applicable | | Your Pos | iition | |
| | | | City A | ttorney | |
| ► If filing for multi | ple positions, list below or on an attachn | nent. (Do not use | | • | |
| Agency: | | | Position: | : | |
| 2. Jurisdiction of | of Office (Check at least one box) | | | | |
| State | | | | Retired Judge, Pro Tem Judgide Jurisdiction) | e, or Court Commissioner |
| Multi-County | | | County | of | |
| ➤ City of Linco | | | | | |
| 2 Type of State | amont (a) I (I (I) | | | | |
| | ement (Check at least one box) | | | | |
| Dece | period covered is January 1, 2023, through the street 31, 2023. | ıgh | ∐ Leavii | ng Office: Date Left/. (Check one c | |
| | period covered is//ember 31, 2023. | , through | _ | ne period covered is January leaving office. | 1, 2023, through the date |
| Assuming Off | fice: Date assumed/ | | | e period covered is/_e date of leaving office. | , through |
| Candidate: D | Date of Election a | and office sought, | , if different than | Part 1: | |
| 4. Schedule Sur | mmary (required) | Total number | of pages inc | luding this cover page | : 2 |
| Schedules a | ttached | | | | |
| Schedule A | A-1 - Investments – schedule attached | × | Schedule C - | Income, Loans, & Business F | Positions – schedule attached |
| Schedule A | A-2 - <i>Investments</i> – schedule attached | | Schedule D - | Income - Gifts - schedule at | tached |
| Schedule E | 3 - Real Property – schedule attached | | Schedule E - | Income – Gifts – Travel Payn | nents - schedule attached |
| | | | | | |
| -or- 🗌 None - | No reportable interests on any s | chedule | | | |
| 5. Verification | | | | | |
| MAILING ADDRESS (Business or Agency A | STREET ddress Recommended - Public Document) | CITY | | STATE | ZIP CODE |
| 600 6th St | , | Lincolr | n | CA 9 | 5648-1825 |
| DAYTIME TELEPHONE | NUMBER | | EMAIL ADDRESS | | |
| (916) 434-2 | 2493 | | kristine.moll | lenkopf@lincolnca.gov | · |
| | sonable diligence in preparing this statem attached schedules is true and complete | | | | ledge the information contained |
| _ | nalty of perjury under the laws of the | • | • | | |
| Date Signed | 01/02/2024 10:59 AM | 9 | ignature | Kristine Mol | lenkopf |
| Dute Orgineu | (month, day, year) | 3 | | (File the originally signed paper statem | <u> </u> |

SCHEDULE C Income, Loans, & Business **Positions**(Other than Gifts and Travel Payments)

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION | | | | |
|---|--|--|--|--|
| Name | | | | |
| Kristine Mollenkopf | | | | |

| 1. INCOME RECEIVED | ► 1. INCOME RECEIVED | | | |
|---|---|--|--|--|
| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME | | | |
| City of Lincoln | Hornbeck Offshore Services | | | |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) | | | |
| 600 6th Street, Lincoln, CA 95648 BUSINESS ACTIVITY, IF ANY, OF SOURCE | 103 Northpark Blvd., Ste. 300, Covington, LA 70433 BUSINESS ACTIVITY, IF ANY, OF SOURCE | | | |
| | | | | |
| Municipal YOUR BUSINESS POSITION | Offshore services YOUR BUSINESS POSITION | | | |
| City Attorney | Ship Captain | | | |
| <u> </u> | <u>_</u> | | | |
| GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$1,000 | GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$1,001 - \$10,000 | | | |
| \$10,001 - \$100,000 X OVER \$100,000 | \$10,001 - \$100,000 X OVER \$100,000 | | | |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED | | | |
| Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) | Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) | | | |
| Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) | Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) | | | |
| Sale of | Sale of | | | |
| (Real property, car, boat, etc.) | (Real property, car, boat, etc.) | | | |
| Loan repayment | Loan repayment | | | |
| Commission or Rental Income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more | | | |
| (Describe) | (Describe) | | | |
| Other | Other | | | |
| (Describe) | (Describe) | | | |
| a retail installment or credit card transaction, made in the | | | | |
| NAME OF LENDER* | INTEREST RATE TERM (Months/Years) | | | |
| | % | | | |
| ADDRESS (Business Address Acceptable) | 050UDITY 505 LOAN | | | |
| | SECURITY FOR LOAN | | | |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | None Personal residence | | | |
| | Real Property | | | |
| HIGHEST BALANCE DURING REPORTING PERIOD | Street address | | | |
| <u>\$500 - \$1,000</u> | City | | | |
| \$1,001 - \$10,000 | _ | | | |
| S10,001 - \$100,000 | Guarantor | | | |
| OVER \$100,000 | Other | | | |
| | (Describe) | | | |
| | Other(Describe) | | | |
| | | | | |