

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date	Filing Of				ed
	AUG	N	6	2024	88

Ple	ease type or print in ink.				CITY OF LINCOLN					
NA	ME OF FILER (LAST)	(FIRST)		(MIDDLE)						
R	eedy	John								
1.	Office, Agency, or Court									
	Agency Name (Do not use acronyms) City of Lincoln				<u> </u>					
	Division, Board, Department, District, if applica	ble	Your Po	osition	·					
			City (Council Candidate						
	▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)									
	Agency:		Positio	on: ————						
2.	Jurisdiction of Office (Check at leas	t one box)								
	State		-	e, Retired Judge, Pro Tem Jud wide Jurisdiction)	dge, or Court Commissioner					
	Multi-County		Coun	ty of						
	City of Lincoln									
_										
3.	Type of Statement (Check at least or	•								
	Annual: The period covered is January of December 31, 2022.	, 2023, through	Leav	ving Office: Date Left (Check one						
	The period covered is/_ December 31, 2023 .	/, through		The period covered is January of leaving office.	, 1, 2022, through the date					
	Assuming Office: Date assumed	J		The period covered is/ he date of leaving office.	/, through					
	Candidate: Date of Election 11/5/202	4 and office sou	ght, if different tha	n Part 1:						
4. Schedule Summary (required) ► Total number of pages including this cover page:										
	Schedules attached									
	Schedule A-1 - Investments – schedule attached Schedule C - Income, Loans, & Business Positions – schedule attached									
	Schedule A-2 - Investments – schedul	e attached	Schedule D	- Income - Gifts - schedule a	attached					
	Schedule B - Real Property - schedule	e attached	Schedule E	- Income – Gifts – Travel Pay	ments - schedule attached					
	or- None - No reportable interests	on any schedule			TOTAL TOTAL					
5.	Verification									
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docu	CITY iment)		STATE	ZIP CODE					
	PO Box 343	Linco	oln	CA	95648					
	DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	3						
(916) 587-1985 John@JohnReedy.com										
	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 Calif	ornia that the fo	regoing is true and correct.	7					
	Date Signed 08/06/2024		Signature	July/my						
	(month, day, year)			(File the originally studed paper state	ment with your filing official.)					

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized. Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
John Reedy

•	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
	Apple	Microsoft		
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
	Technology	Technology		
	FAIR MARKET VALUE	FAIR MARKET VALUE		
	\$2,000 - \$10,000	\$2,000 - \$10,000		
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000		
	NATURE OF INVESTMENT	NATURE OF INVESTMENT		
	Stock Other	Stock Other		
	(Describe)	(Describe)		
	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Sc	hedule C)	
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
		/ /23 / /23		
	ACQUIRED DISPOSED	ACQUIRED DISPOSED		
	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
	FAIR MARKET VALUE	FAIR MARKET VALUE		
	\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000		
	NATURE OF INVESTMENT	NATURE OF INVESTMENT		
	Stock Other (Describe)	Stock Other (Describe)		
	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Sc.	hedule C)	
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
	/ /23 / /23	1		
	//23	//23		
	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY		
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
	FAIR MARKET VALUE	FAIR MARKET VALUE		
	\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000\$10,001 - \$100,000		
	\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000		
	NATURE OF INVESTMENT	MATURE OF INVESTMENT		
	Stock Other (Describe)	Stock Other (Describe)		
	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Sci	hedule C)	
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
	ACQUIRED DISPOSED	ACQUIRED DISPOSED		
	'	1.1		
Со	mments:			