

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

Date Initial Filing Received
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CITY OF SIGNAL HILL
JUL 24 '24 AM11:45

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
WOODS **LORI** **YVONNE**

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
CITY OF SIGNAL HILL

Division, Board, Department, District, if applicable

Your Position

~~COUNCIL MEMBER~~ *Candidate*

► 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)

<input type="checkbox"/> State	<input type="checkbox"/> Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input type="checkbox"/> County of _____
<input checked="" type="checkbox"/> City of SIGNAL HILL	<input type="checkbox"/> Other _____

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

<input type="checkbox"/> Annual: The period covered is January 1, 2021, through December 31, 2021.	<input type="checkbox"/> Leaving Office: Date Left _____/_____/ (Check one circle.)
-or-	The period covered is _____/_____/, through December 31, 2021.
<input type="checkbox"/> Assuming Office: Date assumed _____/_____/	<input type="checkbox"/> The period covered is _____/_____/, through the date of leaving office.
<input checked="" type="checkbox"/> Candidate: Date of Election NOV. 5, 2024 and office sought, if different than Part 1: _____	<input type="checkbox"/> The period covered is _____/_____/, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 1
Schedules attached

<input type="checkbox"/> Schedule A-1 - Investments – schedule attached	<input type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached
<input type="checkbox"/> Schedule A-2 - Investments – schedule attached	<input type="checkbox"/> Schedule D - Income – Gifts – schedule attached
<input type="checkbox"/> Schedule B - Real Property – schedule attached	<input type="checkbox"/> Schedule E - Income – Gifts – Travel Payments – schedule attached

-or- **None** - No reportable interests on any schedule

5. Verification

MAILING ADDRESS (Business Address Preferred - Public Document)	STREET [REDACTED]	CITY SIGNAL HILL	STATE CA	ZIP CODE 90755
DAYTIME TELEPHONE NUMBER [REDACTED]		EMAIL ADDRESS LORI4COUNCIL@GMAIL.COM		

I declare under penalty of perjury under the laws of the State of California that I have prepared this statement 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

Date Signed **JULY 22, 2024**
(month, day, year)

Sig
[REDACTED]

Print

Clear