

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT

Filed Date: 04/01/2024 08:32 PM  
SAN: FPPC

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Eklund Whitney

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Lincoln

Division, Board, Department, District, if applicable

Your Position

Planning Commissioner

► 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  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of \_\_\_\_\_
- City of Lincoln  Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2023, through December 31, 2023.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one circle.)
- or- The period covered is 01 / 25 / 2023, through December 31, 2023.  The period covered is January 1, 2023, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  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: 2

Schedules attached

- Schedule A-1 - Investments – schedule attached  Schedule C - Income, Loans, & Business Positions – schedule attached
- Schedule A-2 - Investments – schedule attached  Schedule D - Income – Gifts – schedule attached
- Schedule B - Real Property – schedule attached  Schedule E - Income – Gifts – Travel Payments – 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)  
600 6th St Lincoln CA 95648-1825  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 916 ) 434-2493

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 04/01/2024 08:32 PM  
(month, day, year)

Signature Whitney Eklund  
(File the originally signed paper statement with your filing official.)

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

**▶ 1. INCOME RECEIVED ▶ 1. INCOME RECEIVED ▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
The Hackett Group  
ADDRESS (Business Address Acceptable)  
1001 Brickell Bay Dr. Miami, FL 33131  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Tech Consulting  
YOUR BUSINESS POSITION  
Sales Director  
GROSS INCOME RECEIVED     No Income - Business Position Only  
 \$500 - \$1,000                 \$1,001 - \$10,000  
 \$10,001 - \$100,000           OVER \$100,000  
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 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.)  
 Sale of \_\_\_\_\_  
  (Real property, car, boat, etc.)  
 Loan repayment  
 Commission or     Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
  (Describe)  
 Other \_\_\_\_\_  
  (Describe)

NAME OF SOURCE OF INCOME  
MindStream Analytics  
ADDRESS (Business Address Acceptable)  
1021 East Lincoln Way Unit 264 Cheyenne, WY 82001  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Tech Consulting  
YOUR BUSINESS POSITION  
VP of Sales  
GROSS INCOME RECEIVED     No Income - Business Position Only  
 \$500 - \$1,000                 \$1,001 - \$10,000  
 \$10,001 - \$100,000           OVER \$100,000  
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 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.)  
 Sale of \_\_\_\_\_  
  (Real property, car, boat, etc.)  
 Loan repayment  
 Commission or     Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
  (Describe)  
 Other \_\_\_\_\_  
  (Describe)

**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_  
ADDRESS (Business Address Acceptable) \_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_  
HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

INTEREST RATE    TERM (Months/Years)  
\_\_\_\_\_ %     None    \_\_\_\_\_  
SECURITY FOR LOAN  
 None     Personal residence  
 Real Property \_\_\_\_\_  
  Street address  
  \_\_\_\_\_ City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
  (Describe)

**Comments:** \_\_\_\_\_