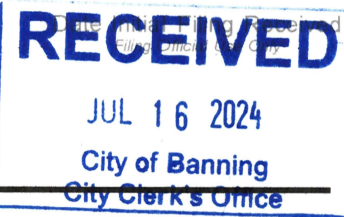


**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
FLYNN SHERI NELSON

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF BANNING

Division, Board, Department, District, if applicable

DISTRICT 3

Your Position

CITY COUNCIL MEMBER

► 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 BANNING

☐ 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 ____/____/_____, through
December 31, 2023.

☐ The period covered is January 1, 2023, through the date
of leaving office.

-or-

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/_____, through
the date of leaving office.

☒ Candidate: Date of Election NOVEMBER 5, 2024 and office sought, if different than 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 - 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)
99 E. RAMSEY ST. BANNING CA 92220

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(909) 253-9980 SFLYNN@BANNINGCA.GOV

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 07/16/2024
(month, day, year)

Signature Sheri Flynn
(File the originally signed paper statement with your filing official.)