CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Please type or print in ink.

(LAST)

NAME

A Public Document

(FIRST)

NAME (LAST) (FIRST)	(MIDDLE) DAYTIME TELEPHONE NUMBER
MARTINEZ, JR TED	(562) 908-3403
MAILING ADDRESS STREET CITY (Business Address Acceptable)	STATE ZIP CODE OPTIONAL: E-MAIL ADDRESS
3600 WORKMAN MILL NO WHIT	TIER CA 9060/ ted martinge riob
1. Office, Agency, or Court	4. Schedule Summary
Name of Office, Agency, or Court:	► Total number of pages
RIO HUNDO COMM COLLDIST	including this cover page:
Division, Board, District, if applicable:	► Check applicable schedules or "No reportable interests."
Your Position: PRESIDENT	I have disclosed interests on one or more of the attached schedules:
➤ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)	Schedule A-1 Yes - schedule attached Investments (Less than 10% Ownership)
Agency:	Schedule A-2 Yes – schedule attached Investments (10% or Greater Ownership)
Position:	Schedule B
2. Jurisdiction of Office (Check at least one box)	Schedule C Yes – schedule attached income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
State County of LOS ANGELES	Schedule D Yes – schedule attached
City of	Schedule E
Multi-County	Income – Gifts – Travel Payments
Other	-or-
3. Type of Statement (Check at least one box)	No reportable interests on any schedule
Assuming Office/Initial Date: 7/ / 07	5. Verification
Annual: The period covered is January 1, 2009, through December 31, 2009.	I have used all reasonable diligence in preparing this
-or-	statement. I have reviewed this statement and to the host
O The period covered is/, through December 31, 2009.	of my knowledge the information contained herein and in any attached schedules is true and complete.
Leaving Office Date Left://(Check one)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
O The period covered is January 1, 2009, through the date of leaving office.	Date Signed3//6//0
-or-	(month, day, year)
O The period covered is/, through the date of leaving office.	Signature
Candidate Election Year:	(File the originally signed statement with your filing official.)

FPPC Form 700 (2009/2010) FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov

FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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September 2017 Control of the Control of Con	
NAME (LAST) (FIRST) Acosta-Salazae Ange!	(MIDDLE) DAYTIME TELEPHONE NUMBER
MAILING ADDRESS STREET CITY	STATE ZIP CODE OPTIONAL: E-MAIL ADDRESS
(Business Address Acceptable) 6241 Friends Avr. Whitte	ST HOUSE CHANGE ADDRESS
Walk and the second sec	
1. Office, Agency, or Court	4. Schedule Summary
Name of Office, Agency, or Court:	► Total number of pages
Rio Hondo College District	including this cover page:
Division, Board, District, if applicable:	► Check applicable schedules or "No reportable interests."
Your Position: TWISTEE	I have disclosed interests on one or more of the attached schedules:
	Schodulo A 7 FT V
► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)	Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)
Agency:	Schedule A-2 Yes — schedule attached Investments (10% or Greater Ownership)
Position:	Schedule B Yes - schedule attached Real Property
	Schedule C Tyes - schedule attached
2. Jurisdiction of Office (Check at least one box)	Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
State Vicounty of LOS Angeles	Schedule D Yes – schedule attached
City of	moone = Ons
☐ Multi-County	Schedule E Yes – schedule attached Income – Gifts – Travel Payments
Other	-or-
	1776
3. Type of Statement (Check at least one box)	No reportable interests on any schedule
Assuming Office/Initial Date:/ \	5. Verification
Annual: The period covered is January 1, 2009, through December 31, 2009.	I have used all reasonable diligence in preparing this
[statement. I have reviewed this statement and to the best
-or-	of my knowledge the information contained herein and in any
O The period covered is/, through December 31, 2009.	attached schedules is true and complete.
Leaving Office Date Left:/(Check one)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
O The period covered is January 1, 2009, through the date of leaving office.	Date Signed March 9,2010
-or-	(month, day, year)
O The period covered is//, through the date of leaving office.	Signature Mayla Westa Salanare (File the originally signed statement with your filling official)
Candidate Election Year:	was a superior signed statement with your filing official

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Please type or print in ink.

A Public Document

NAME (AST) (FIRST)	(MIDDLE) DAYTIME TELEPHONE NUMBER
(Muntero, Andre	(626) 536-737
MAILING ADDRESS STREET CITY (May use business address)	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS
P.O. Box 4787 E1	Monte, CA 91734 (616) 602-9967
1. Office, Agency, or Court	4. Schedule Summary
Name of Office, Agency, or Court:	► Total number of pages
Rio Hando CCD	including this cover page:
Division, Board, District, if applicable:	► Check applicable schedules or "No reportable
Trustee Area 1	interests."
Your Position:	I have disclosed interests on one or more of the attached schedules:
1 nystee	
▶ If filing for multiple positions, list additional agency(ies)/	Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)
position(s): (Attach a separate sheet if necessary.)	Schedule A-2 Yes – schedule attached
Agency: City of El Monte	Investments (10% or greater Ownership)
Position: Mam 5	Schedule B Yes – schedule attached
Position: TWV U 8	Real Property
	Schedule C Yes – schedule attached
2. Jurisdiction of Office (Check at least one box)	Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
State	Schedule D Yes - schedule attached
Acounty of Jos Angeles	Income – Gifts
City of	Schedule E 💢 Yes – schedule attached
Multi-County	Income – Gifts – Travel Payments
Other	-or-
3. Type of Statement (Check at least one box)	No reportable interests on any schedule
Assuming Office/Initial Date:/	
Annual: The period covered is January 1, 2008,	5. Verification
through December 31, 2008.	I have used all reasonable diligence in preparing this
-or-	statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any
O The period covered is/, through December 31, 2008.	attached schedules is true and complete.
Leaving Office Date Left: 1 /30,09 (Check one)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
O The period covered is January 1, 2008, through the date of leaving office.	Date Signed \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
The period covered is	Signature
Candidate Election Veer	(Fife the originally signed statement with your filing official.)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

O The period covered is __

Candidate

the date of leaving office.

Election Year: _

TATEMENT OF ECONOMIC INTERESTS COVER PAGE

A Public Document

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDI	LE.)	DAYTIME TELEPHONE NUMBER
Martinez	Maria-Elena			(⁵⁶² 908–3404
MAILING ADDRESS STREET (Business Address Acceptable)	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
3600 Workman Mill Road	Whittier	CA	90601	
1. Office, Agency, or Court		4. Schedu	le Summar	у
Name of Office, Agency, or Court:		► Total numb	er of pages	2
Rio Hondo Community Coll	ege District	including t	his cover page	e:
Division, Board, District, if applicable:	-		icable schedu	les or "No reportable
Board of Trustees		interests."	lacad interacts	on one or more of the
Your Position:	·	attached so		OIT OFFE OF THOSE OF THE
Board Member		Schedule A	-1 🗌 Yes - s	schedule attached
► If filing for multiple positions, list ad			(Less than 10% Owr	
position(s): (Attach a separate sh	eet ii necessary.)	Schedule A	-2 Yes - s	schedule attached
Agency:		Investments	(10% or Greater Ow	mership)
		Schedule E		schedule attached
Position:		Real Proper	ty	•
	· · · · · · · · · · · · · · · · · · ·	. Schedule (schedule attached
2. Jurisdiction of Office (che	eck at least one box)	Income, Loa and Travel Pay		Positions (Income Other than Gifts
☐ State	•	Schedule I) [] Yes - :	schedule attached
🖾 County of Los Angeles		Income – G		
City of		Schedule	E ☐ Yes –	schedule attached
Multi-County		Income – G	ifts – Travel Payr	ments
Other			-01	r -
		☐ No ren	ortable interests	s on any schedule
3. Type of Statement (Check	(at least one box)			
Assuming Office/Initial Date				<u> </u>
		5. Verifica	tion	
X Annual: The period covered is July through December 31, 2009.	anuary 1, 2009,			le diligence in preparing this
-or-				I this statement and to the best ation contained herein and in any
O The period covered is/_	, through -		edules is true a	
December 31, 2009.		l certify unde	er penalty of ne	rjury under the laws of the State
Leaving Office Date Left: (Check one)				going is true and correct.
O The period covered is January	1, 2009, through the		5 10	10
date of leaving office.		Date Signe	d5-12-	(month, day, year)

through

Signature .

FPPC Form 700 (2009/2010)



STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

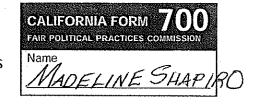
Please type or print in ink.

A Public Document

NAME (LAST)	(FIRST)	(MIDDLE) DAYTIME TELEPHOŅE NUMBER
SHAPIRO	MADELII	NE RUTH (562, 907-6468)
MAILING ADDRESS STREET (Business Address Acceptable)	CITY WHIT	TIER STATE ZIP CODE OPTIONAL: E-MAIL ADDRESS
9816 MARYKNOLL	AVE.	CA 90605
1. Office, Agency, or Court		4. Schedule Summary
Name of Office, Agency, or Court:		► Total number of pages
RIO HONDO COMMUNI	TY COLLEGE	including this cover page:
Division, Board, District, if applicable:		➤ Check applicable schedules or "No reportable interests."
COVERNING Your Position:	DISTRICT 5	I have disclosed interests on one or more of the
BOARD OF TRUSTEES	MEMBER	attached schedules:
► If filing for multiple positions, list addition(s): (Attach a separate sheet	onal agency(ies)/	Schedule A-1 X Yes – schedule attached Investments (Less than 10% Ownership)
		Schedule A-2 Yes – schedule attached
Agency:		Investments (10% or Greater Ownership)
Position:		Schedule B Yes - schedule attached Real Property
		Schedule C Yes – schedule attached
2. Jurisdiction of Office (Check	at least one box)	Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
State County of LOS ANGE	LES	Schedule D Yes – schedule attached Income – Gifts
City of		Schedule E Yes – schedule attached
Multi-County		Income - Gifts - Travel Payments
Other	•	-or-
3. Type of Statement (Check at	t least one box)	No reportable interests on any schedule
Assuming Office/Initial Date: 4	2,9,2009	
		5. Verification
Annual: The period covered is Januthrough December 31, 2009.	eary 1, 2009,	I have used all reasonable diligence in preparing this
-or-		statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any
O The period covered is/	, through	attached schedules is true and complete.
Leaving Office Date Left:/ (Check one)		I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
O The period covered is January 1, date of leaving office.	2009, through the	Date Signed 3/22/10
-or-		(month, day, year)
O The period covered is/ the date of leaving office.	_/, through	Signature Nauline Shapino (File the originally signed statement with yoff filing official.)
Candidate Election Year:		

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.



▶ 1	IAME OF BUSINESS ENTITY HE WALT DISNEY COMPANY		NAME OF BUSINESS ENTITY
2	ENERAL DESCRIPTION OF BUSINESS ACTIVITY		GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Á	ENTERTAINMENT		
F	AIR MARKET VALUE		FAIR MARKET VALUE
_	₹\$2,000 - \$10,000		\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	l	\$100,001 - \$1,000,000
V	IATURE OF INVESTMENT	L	NATURE OF INVESTMENT
Σ	Stock Other (Describe)	ı	NATURE OF INVESTMENT Stock Other (Describe)
Γ	Partnership O Income of \$0 - \$500	1	(Describe) Partnership (Income of \$0 - \$500)
	O Income Received of \$500 or More (Report on Schedule C)	ı	O Income Received of \$500 or More (Report on Schedule C)
H	F APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
		l	
	ACQUIRED DISPOSED	ı	ACQUIRED DISPOSED
> 1	IAME OF BUSINESS ENTITY	Τ	► NAME OF BUSINESS ENTITY
_		ı	
G	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	ı	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
		ı	
 F	AIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000	Ī	\$2,000 - \$10,000 \$10,001 - \$100,000
E	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
1	NATURE OF INVESTMENT	I	NATURE OF INVESTMENT
-	Stock Other	l	Stock Clother
r	(Describe) Partnership (Income of \$0 - \$500	ı	(Describe) Partnership () Income of \$0 - \$500
_	O Income Received of \$500 or More (Report on Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
I	F APPLICABLE, LIST DATE:	ı	IF APPLICABLE, LIST DATE:
		ł	
	ACQUIRED DISPOSED	ł	ACQUIRED DISPOSED
<u>► 1</u>	NAME OF BUSINESS ENTITY	T	► NAME OF BUSINESS ENTITY
-		ı	
(GENERAL DESCRIPTION OF BUSINESS ACTIVITY	l	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
_		ı	
F	FAIR MARKET VALUE	1	FAIR MARKET VALUE
֝֞֟֝֟֝֟֝֟	\$2,000 - \$10,000		\$2,000 - \$10,000 \$10,001 - \$100,000
Į	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
1	VATURE OF INVESTMENT		NATURE OF INVESTMENT
[Stock Other (Describe)	ı	Stock Other (Describe)
[Partnership O Income of \$0 - \$500	ı	Partnership O Income of \$0 - \$500
•	O Income Received of \$500 or More (Report on Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
ı	F APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
		1	/ / 09 // / 09
•	ACQUIRED DISPOSED		ACQUIRED DISPOSED
^ -		•	
Col	mments:		

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

O The period covered is _ the date of leaving office.

Election Year: .

Candidate

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

1 Public Document

Please type or print in ink.	A PUO	uc Documen	Į	
NAME (LAST)	(FIRST)	(MIDD	E)	DAYTIME TELEPHONE NUMBER
Mender	(gary	6	•	(562) 569 5569
MAILING ADDRESS STREET (Business Address Acceptable)	CITY (ac	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
azil Vicili	Drue, Son 3pring		90670	
1. Office, Agency, or Cou	t	4. Schedu	le Summar	У
Name of Office, Agency, or Court:	ity Codege Dan	► Total number including t	oer of pages his cover page	e:
Division, Board, District, if applicab	le:	interests."		les or "No reportable
Your Position: Colerning Goardh	nember	I have disc attached so		on one or more of the
► If filing for multiple positions, list position(s): (Attach a separate	additional agency(ies)/	4	1 ☐ Yes - s (Less than 10% Own	schedule attached
Agency:			1-2 Yes - 9 (10% or Greater Ow	schedule attached
Position:		Schedule E Real Proper		schedule attached
2. Jurisdiction of Office (Check at least one box)	Schedule (Income, Loa and Travel Pay	ns, & Business F	schedule attached Positions (Income Other than Gifts
State Scounty of Up & Awayley		Schedule I		schedule attached
City of		Schedule I	E ☐ Yes –	schedule attached
☐ Multi-County		Income – G	ifts – Travel Payı	•
Other			-Oi	r- ·
3. Type of Statement (Chi	eck at least one box)	☐ No repo	ortable interests	s on any schedule
Assuming Office/Initial Da	ate:	5. Verifica	tion	
Annual: The period covered is through December 31, 2009.	January 1, 2009,	I have used	l all reasonab	le diligence in preparing this dithis statement and to the best
O The period covered is December 31, 2009,	, through	of my knowle	edge the information is true a	ation contained herein and in any
Leaving Office Date Left: (Check one)		l certify unde of California	r penalty of pen that the fore	rjury under the laws of the State going is true and correct.
O The period covered is Janu date of leaving office.	ary 1, 2009, through the	Date Signe	a Mu	4 \ 7/0 A
-òr-	All and a second		1	(month, day, year)

Signature

FPPC Form 700 (2009/2010)
FPPC Toll-Free Helpline: 866/ASK-FPPC Value for a second control of the second contr

(File the originally signed statement with your filing official.)

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

CALIFORNIA FORM 7	OO SSION
Name Mendoz, 6	M

INCOME RECEIVED	➤ 1. INCOME RECEIVED
ME OF SOURCE OF INCOME.	NAME OF SOURCE OF INCOME
DORESS (Basiness Address Acceptable) Worthvidge Region of Guffer	
DDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
Nonthridge legion is lew to	
JSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DUR BUSINESS POSITION	YOUR BUSINESS POSITION
Davrershi Speanly	
,	GROSS INCOME RECEIVED
ROSS INCOME RECEIVED 1 \$500 - \$1,000	\$500 - \$1,000 \$1,001 - \$10,000
] \$500 - \$1,000	\$10,001 - \$100,000 OVER \$100,000
J. 410,007, 44100,000	
ONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income
Salary Spouse's or registered domestic partner's income	
Coan repayment .	Loan repayment
Sale of(Property, car, boat, etc.)	Sale of
(Property, car, boat, etc.)	(Property, Car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
•	
Other	Other
— (Describe)	(Describe)
(Describe)	(Describe)
(Describe)	(Describe)
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE * You are not required to report loans from commercia of a retail installment or credit card transaction, made	RIOD al lending institutions, or any indebtedness created as particular to the lender's regular course of business on terms be your official status. Personal loans and loans received
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to	RIOD al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received
You are not required to report loans from commercial of a retail installment or credit card transaction, mad available to members of the public without regard to not in a lender's regular course of business must be	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received a disclosed as follows:
You are not required to report loans from commercial of a retail installment or credit card transaction, mad available to members of the public without regard to not in a lender's regular course of business must be	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received a disclosed as follows: INTEREST RATE TERM (Months/Years)
* You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received a disclosed as follows: INTEREST RATE Whome SECURITY FOR LOAN
* You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received a disclosed as follows: INTEREST RATE TERM (Months/Years)
* You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER* ADDRESS (Business Address Acceptable)	al lending institutions, or any indebtedness created as partie in the lender's regular course of business on terms by your official status. Personal loans and loans received a disclosed as follows: INTEREST RATE TERM (Months/Years) SECURITY FOR LOAN None Personal residence
* You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER* ADDRESS (Business Address Acceptable)	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received a disclosed as follows: INTEREST RATE Whome SECURITY FOR LOAN
* You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received as disclosed as follows: INTEREST RATE TERM (Months/Years) Whene SECURITY FOR LOAN None Personal residence Real Property Street address
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received as disclosed as follows: INTEREST RATE Whone SECURITY FOR LOAN None Real Property Street address City
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$1,001 - \$10,000	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received as disclosed as follows: INTEREST RATE TERM (Months/Years) Whene SECURITY FOR LOAN None Personal residence Real Property Street address
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be 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	al lending institutions, or any indebtedness created as pade in the lender's regular course of business on terms by your official status. Personal loans and loans received a disclosed as follows: INTEREST RATE Whone SECURITY FOR LOAN None Real Property Street address City
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$1,001 - \$10,000	al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received as disclosed as follows: INTEREST RATE Whone SECURITY FOR LOAN None Real Property Street address City
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be 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	Al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received as disclosed as follows: INTEREST RATE TERM (Months/Years) Whone SECURITY FOR LOAN None Personal residence Real Property Street address City
You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be 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	Al lending institutions, or any indebtedness created as parties in the lender's regular course of business on terms by your official status. Personal loans and loans received as disclosed as follows: INTEREST RATE TERM (Months/Years) Whone SECURITY FOR LOAN None Personal residence Real Property Street address City



STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A Public Document

Please type or print in ink.	Alu	one Document	,	
NAME (LAST)	(FIRST)	(MIDDL	E)	DAYTIME TELEPHONE NUMBER
Garcia	Norma	Editi	n	(626) 233-2416
MAILING ADDRESS STREET (Business Address Acceptable)	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
3120 Lexington Avenue	El Monte	CA	91731	garciane@yahoo.com
1. Office, Agency, or Cou	rt	4. Schedu	le Summa	ıry
Name of Office, Agency, or Court:		► Total numb		1
Rio Hondo Community College	District	including t	his cover pag	ge:
Division, Board, District, if applicat	ole:	► Check applinterests."	icable sched	ules or "No reportable
Governing Board			osed interests	s on one or more of the
Your Position:		attached sc		
Trustee		Schedule A	-1 🗌 Yes –	schedule attached
If filing for multiple positions, lis position(s): (Attach a separate		Investments	(Less than 10% O	wnership)
Agency:		Schedule A Investments	-2 Yes – (10% or Greater O	schedule attached wnership)
1.3		Schedule B	□ Voc	schedule attached
Position:		Real Propert		
		Şchedule C	∷ ∐ Yes -	schedule attached
2. Jurisdiction of Office	Check at least one box)	Income, Loa and Travel Pay		Positions (Income Other than Gifts
☐ State		Schedule C) ∏Yes -	schedule attached
County of		Income – Gi		
City of		Schedule E	Yes	schedule attached
Multi-County		Income – Gi	fts – Travel Pay	yments
Other College District	,		-c	or-
;		No repo	rtable interest	ts on any schedule
3. Type of Statement (CF	neck at least one box)		TODIC TROPOS	-
Assuming Office/Initial	Pate: 12 / 09 / 09			
		5. Verifica	tion	
Annual: The period covered in through December 31, 2009.	s January 1, 2009,			ble diligence in preparing this
-or-				d this statement and to the best lation contained herein and in any
⊗ The period covered is 12 December 31, 2009.	<u></u>			and complete.
Leaving Office Date Left:(Check one)				erjury under the laws of the State egoing is true and correct.

Date Signed

Signature

O The period covered is January 1, 2009, through the

_, through

-or-

date of leaving office.

O The period covered is __

Candidate

the date of leaving office.

Election Year: _

(File the originally signed statement with your filing official.)

March 24, 2010

(month, day, year)

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