STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER
(LAST) MARTINEZ, JR
(FIRST) TED
(MIDDLE)

1. Office, Agency, or Court
Agency Name
RIO HONDO COLLEGE
Division, Board, Department, District, if applicable
Your Position
PRESIDENT
Position: BOARD MEMBER

2. Jurisdiction of Office (Check at least one box)
☐ State
☐ Multi-County
☐ City of
☐ Judge (Statewide Jurisdiction)
☒ County of LOS ANGELES
☐ Other

3. Type of Statement (Check at least one box)
☐ Leaving Office: Date Left __/__/____
☐ The period covered is January 1, 2010, through the date of leaving office.
☐ The period covered is __/__/____, through the date of leaving office.
☐ Assuming Office: Date __/__/____
☐ Candidate: Election Year __________ Office sought, if different than Part 1: __________

4. Schedule Summary
☐ Schedule A-1 - Investments - schedule attached
☐ Schedule A-2 - Investments - schedule attached
☐ Schedule B - Real Property - schedule attached
☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached
☐ Schedule F - Real Property - schedule attached
☐ Schedule G - Real Property - schedule attached
☐ Schedule H - Real Property - schedule attached
☐ Schedule I - Real Property - schedule attached
☐ Schedule J - Real Property - schedule attached

☐ Total number of pages including this cover page: __________

☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
3600 WORKMAN MILL RD
WHITTIER CA 90601
STREET CITY STATE ZIP CODE

DAYTIME TELEPHONE NUMBER
(562) 908-3403
E-MAIL ADDRESS
tedmartinez@riohondo.edu

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 forgoing is true and correct.

Date Signed 04/01/11
(month, day, year)
Signature

FPPC Form 700 (2010/2011)
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
Agency Name: Rio Hondo Community College District - Board of Trustees

1. Office, Agency, or Court

Agency: Governing Board of Trustees

2. Jurisdiction of Office (Check at least one box)

- [ ] State
- [ ] Multi-County
- [ ] City of
- [ ] County of
- [ ] Other

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

- [ ] Leaving Office: Date Left: 12/10/11

4. Schedule Summary

- [ ] Schedule A - Investments - schedule attached
- [ ] Schedule B - Real Property - schedule attached
- [ ] Schedule C - Income, Loans, & Business Positions - schedule attached
- [ ] Schedule D - Income - Gifts - schedule attached
- [ ] Schedule E - Income - Gifts - Travel Payments - schedule attached

- [ ] None - No reportable Interests on any schedule

5. Verification

Mailing Address:
944 Aver Dr
Pico Rivera, CA 90630

Daytime Telephone Number: (323) 482-3591
E-mail Address: martinezm@riohondc.edu

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed: 11/11/11

Signature: Maria L. Martinez
NAME OF FILER
(LAST) Agosta-Salazar
(FIRST) Angela

1. Office, Agency, or Court
Agency Name
Rio Hondo College
Position
Trustee

2. Jurisdiction of Office (Check at least one box)
- [ ] State
- [ ] Multi-County
- [ ] City of ____________________________
- [ ] County of Los Angeles
- [ ] Judge (Statewide Jurisdiction)
- [ ] Other ____________________________

3. Type of Statement (Check at least one box)
- [ ] Leaving Office: Date Left ___________________________________________
- [ ] The period covered is January 1, 2010, through the date of leaving office.
- [ ] The period covered is ____________________________, through the date of
leaving office.
- [ ] Assuming Office: Date ____________________________
- [ ] Candidate: Election Year ____________________________

4. Schedule Summary
[ ] Schedule A-1 - Investments — schedule attached
[ ] Schedule A-2 - Investments — schedule attached
[ ] Schedule B - Real Property — schedule attached
[ ] Schedule C - Income, Loans, & Business Positions — schedule attached
[ ] Schedule D - Income - Gifts — schedule attached
[ ] Schedule E - Income - Gifts - Travel Payments — schedule attached

[ ] None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
6241 Friends Ave.
WHITTIER CA 90601
STREET
(City or Agency Address Recommended - Public Document)
STATE ZIP CODE
DAYTIME TELEPHONE NUMBER
562-698-8950
E-MAIL ADDRESS
angela@acosta-salazar.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 California that the foregoing is true and correct.

Date Signed March 9, 2011
(Signature) Angela Agosta-Salazar
(Fill the originally signed statement with your filing official)

FPPC Form 700 (2010/2011)
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER
Garcia

(LAST) Norma Edith
(FIRST) (MIDDLE)

1. Office, Agency, or Court
Agency Name
Rio Hondo Community College District
Board Trustee
Division, Board, Department, District, if applicable
Governor Board of Trustees

› If filing for multiple positions, list below or on an attachment.

Agency: ____________________________________________ Position: ____________________________

2. Jurisdiction of Office (Check at least one box)
☐ State
☐ Multi-County
☐ City of ____________________________________________
☐ Judge (Statewide Jurisdiction)
☐ County of ___________________________________________
☐ Other Rio Hondo Community College District

3. Type of Statement (Check at least one box)
☐ Leaving Office: Date Left ____________
☐ or:
☐ The period covered is ____________ through December 31, 2010.
☐ The period covered is ____________ through the date of leaving office.

☐ Assuming Office: Date ____________
☐ Candidate: Election Year ____________ Office sought, if different than Part 1: ____________________________

4. Schedule Summary
Check applicable schedules or "None."

☐ Schedule A-1 - Investments - schedule attached
☐ Schedule A-2 - Investments - schedule attached
☐ Schedule B - Real Property - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

☐ None - No reportable interests on any schedule

Total number of pages including this cover page: 1

5. Verification

Mailing Address
3120 Lexington Avenue
El Monte CA 91731

Business or Agency Address Recommended - Public Document

Daytime Telephone Number (626) 579-2263
garciane@yahoo.com

E-Mail Address

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 1/1/11
(Signature)
(For the originally signed statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER
(LAST) (FIRST) (MIDDLE)
SHAPIRO MADELINE R

1. Office, Agency, or Court
Agency Name
Rio Hondo Community College
Division, Board, Department, District, if applicable
Governing Board of Trustees Clerk District 5
Your Position

► If filing for multiple positions, list below or on an attachment.
Agency: ____________________________ Position: ____________________________

2. Jurisdiction of Office (Check at least one box)
☐ State
☐ Multi-County ____________________________
☐ City of ____________________________
☐ Judge (Statewide Jurisdiction)
☐ County of Los Angeles
☐ Other ____________________________

3. Type of Statement (Check at least one box)
   ☐ Leaving Office: Date Left __/__/____
   (Check one)
   ☐ The period covered is January 1, 2010, through the date of leaving office.
   ☐ The period covered is __/__/____, through the date of leaving office.
☐ Assuming Office: Date __/__/____
☐ Candidate: Election Year __________ Office sought, if different than Part 1: ____________________________

4. Schedule Summary
Check applicable schedules or “None.”
☐ Schedule A-1 - Investments - schedule attached
☐ Schedule A-2 - Investments - schedule attached
☐ Schedule B - Real Property - schedule attached
☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

► Total number of pages including this cover page: ____________________________
☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
(Business or Agency Address Recommended - Public Document)
9816 Maryknoll Ave, Whittier CA 90605
DAYTIME TELEPHONE NUMBER
1562 907-6468
E-MAIL ADDRESS
madrshap@aol.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 California that the foregoing is true and correct.

Date Signed 3/10/11 Signature Madeline Shapiro

(month, day, year) (Print the originally signed statement with your filing official.)
### SCHEDULE A-1

**Investments**

**Stocks, Bonds, and Other Interests**

*(Ownership Interest is Less Than 10%)*

_Do not attach brokerage or financial statements._

#### NAME OF BUSINESS ENTITY

**THE WALT DISNEY COMPANY**

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

**ENTERTAINMENT**

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**NATURE OF INVESTMENT**

- Stock
- Other

- Partnership
- Income Received of $0 - $499
- Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- 1/10 ACQUIRED
- 1/10 DISPOSED

---

#### NAME OF BUSINESS ENTITY

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**NATURE OF INVESTMENT**

- Stock
- Other

- Partnership
- Income Received of $0 - $499
- Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- 1/10 ACQUIRED
- 1/10 DISPOSED

---

#### NAME OF BUSINESS ENTITY

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**NATURE OF INVESTMENT**

- Stock
- Other

- Partnership
- Income Received of $0 - $499
- Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- 1/10 ACQUIRED
- 1/10 DISPOSED

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**Comments:**

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**CALIFORNIA FORM 700**

**FAIR POLITICAL PRACTICES COMMISSION**

**Name:** MADELINE SHAPIRO


FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Please type or print in ink.

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

Mendez Gary L

1. Office, Agency, or Court

Agency Name

Llano Community College District

Division, Board, Department, District, if applicable

Governing Board Member

Your Position

If filing for multiple positions, list below or on an attachment.

Agency: 

Position: 

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Multi-County

☐ City of 

☐ County of 

☐ Other: Llano Community College District

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


☐ The period covered is __________, through December 31, 2010.

☐ Leaving Office: Date Left __________ (Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ The period covered is __________, through the date of leaving office.

☐ Assuming Office: Date __________

☐ Candidate: Election Year __________ Office sought, if different than Part 1:

4. Schedule Summary

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
9218 Uciavi Street
Santafe Spring, CA 90670

STREET

CITY

STATE

ZIP CODE 90670

DAYTIME TELEPHONE NUMBER (562) 569-2136

E-MAIL ADDRESS gary.mendez@aad.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 acknowledgment 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 1/1/11

Signature ____________________________

(month, day, year)

(use the originally signed statement with your filing official)

FPPC Form 700 (2010/2011)

FPPC Toll-Free Halpline: 866/275-3772 www.fppc.ca.gov