STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
RIO HONDO COMMUNITY COLLEGE

Division, Board, Department, District, if applicable
Your Position
DISTRCT SUPERINTENDENT/PRESIDENT

- If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
West San Gabriel Valley JPA
Agency: So. CA Community College Distr JPA
Board Member (WSGV JPA)
Board Member (SCCCD JPA)

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

☐ State
☐ Multi-County
☐ City of
☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other

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

☐ Annual: The period covered is January 1, 2015, through December 31, 2015.
- or -
The period covered is __/__/____, through December 31, 2015.
☐ Leaving Office: Date Left __/__/____
☐ Assuming Office: Date assumed __/__/____
☐ Candidate: Election year ___________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) = total number of pages including this cover page:

Schedules attached
☐ Schedule A1 - Investments - schedule attached
☐ Schedule A2 - 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
- or -
☑ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
3600 Workman Mill Road Whittier CA 90601

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(562) 463-7099 tdreyfuss@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 foregoing is true and correct.

Date Signed __/__/____
(month, day, year)
Signature

(Fill out originally signed statement with your filing officer)
STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

NAME OF FILER

SHAPIRO

MADELINE

RUTH

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

RIO HONDO COMMUNITY COLLEGE BOARD OF TRUSTEES

Division, Board, Department, District, if applicable

DISTRICT 5

Your Position

CLERK, GOVERNING

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

☐ Multi-County

☐ City of

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ County of

☐ Other

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

☒ Annual: The period covered is January 1, 2015, through December 31, 2015.

☐ Leaving Office: Date Left __________________________

☐ The period covered is __________________________, through December 31, 2015.

☐ Assuming Office: Date assumed __________________________

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

☐ Candidate: Election year ____________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ⬤ Total number of pages including this cover page

☐ 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

☐ Schedule F - Property Taxes - schedule attached

5. Verification

MAILING ADDRESS

9816 MARYKNOLL AVE. WHITTIER CA 90605

STREET

DAYTIME TELEPHONE NUMBER

(562) 907 - 6468

E-MAIL ADDRESS

madrshop@aol.com

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and 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 __________________________

Signature __________________________

File the originally signed statement with your filing office.

FPPC Form 700 (2015/2016)
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)
Do not attach brokerage or financial statements.

Name: MADELINE SHAPIRO

☐ NAME OF BUSINESS ENTITY

THE WALT DISNEY COMPANY
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:

/ / 15
ACQUIRED
/ / 15
DISPOSED

☐ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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:

/ / 15
ACQUIRED
/ / 15
DISPOSED

Comments:

☐ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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:

/ / 15
ACQUIRED
/ / 15
DISPOSED

☐ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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:

/ / 15
ACQUIRED
/ / 15
DISPOSED

FPPC Form 700 (2015/2016) Sch. A-1
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

NAME OF FILER: Garcia  Norma  Edith

1. Office, Agency, or Court

Agency Name: Los Angeles County College Board of Trustees

Division, Board, Department, District, if applicable: Board of Trustees

Your Position: Deputy Director

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

☐ State

☐ Multi-County

☐ City of

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ County of Los Angeles

☐ Other

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

☐ Annual: The period covered is January 1, 2015, through December 31, 2015.

☐ Assumed Office: Date assumed

☐ Leaving Office: Date Left

☐ The period covered is January 1, 2015, through the date of leaving office.

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

☐ Candidate: Election year and office sought, if different than Part 1:

4. Schedule 1-5 (Include schedules that apply to your office.)

☐ Yes

☐ No

5. Verification

MAILING ADDRESS: 9114 Richmond Avenue, El Monte, CA 91732

DAYTIME TELEPHONE NUMBER: 626-233-2416

E-MAIL ADDRESS: garcianb@yahoo.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 to be 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: 3/9/14

Signature: (Please sign your original document with your filing official.)
CALIFORNIA FORM 700
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER: PACHECO

1. Office, Agency, or Court

Agency Name: RIO HONDO COMMUNITY COLLEGE DISTRICT
Division, Board, Department, District, if applicable: BOARD OF TRUSTEES
Your Position: PRESIDENT

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

☐ State
☐ Multi-County
☐ County of LOS ANGELES
☐ Other

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

☑ Annual: The period covered is January 1, 2015, through December 31, 2015.
☐ Leaving Office: Date Left __________/_________/__________ (Check one)
☐ The period covered is January 1, 2015, through the date of leaving office.
☐ The period covered is __________/_________/__________, through
the date of leaving office.

☐ Assuming Office: Date assumed __________/_________/__________

☐ Candidate: Election year __________/_________/__________ and office sought, if different than Part 1:

4. Schedule Summary, Indicate All(s) > Total number of pages including this cover page: 1

☐ Schedule A: Financial Interest and Transaction Schedule
☐ Schedule B: Real Property, Ownership and Control
☐ Schedule C: Zoning Permits
☐ Schedule D: Registered Nickname and Trade Name
☐ Schedule E: Income, Gifts, Trusts

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS: 3600 Workman Mill Road
STATE: CA
ZIP CODE: 90601

CITY: Whittier

STREET: 562-556-1639

E-MAIL ADDRESS: mapachecos@gmail.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: 3/11/16

Signature: Mary Ann Pacheco

(Attach the originally signed statement with your filing official)
STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Please type or print in ink.

NAME OF FILER

(LAST)   (FIRST)   (MIDDLE)

Santana   Vicky

1. Office, Agency, or Court

Agency Name

Rio Hondo Community College

Division, Board, Department, District, if applicable

Your Position

Member of the 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 or Court Commissioner (Statewide Jurisdiction)

☐ County of _______________________________________

☐ Other Agency's Jurisdiction

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

☒ Annual: The period covered is January 1, 2015, through December 31, 2015.

- or -

The period covered is ________________, through December 31, 2015.

☐ Leaving Office: Date Left ________________

(Show one)

☐ The period covered is January 1, 2015, through the date of leaving office.

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

☐ Assuming Office: Date assumed ________________

☐ Candidate: Election Year ________________ and office sought, if different than Part 1: ________________

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

Schedules attached

☐ 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

- or -

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS

Streets

City

State

ZIP CODE

Whittier

CA

90601

DAYTIME TELEPHONE NUMBER

()-

E-MAIL ADDRESS

vicky.santana1@gmail.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 ________________

(month, day, year)

Signature ______________________

E-Filed By Vicky Santana

(File the originally signed statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Mendez (Loaey) (Gabriel)

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Do Nono Community College District Governing Board
Division, Board, Department, District, if applicable
Arenas Governing Board member
Your Position

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
☐ Multi-County
☐ City of
☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2015, through December 31, 2015.
☐ or-
The period covered is __________, through December 31, 2015.
☐ Leaving Office: Date Left ______ / ______ / ______
☐ Assumining Office: Date assumed ______ / ______ / ______
☐ Other
☐ Candidate: Election year _______ and office sought, if different than Part 1:

4. Supplementary Information (attach additional schedules if necessary)

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
Gary Mendez
3600 Workman Mill Rd Whittier CA 90601
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
( )
gary.mendez@pc.ac

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 5/1/16

Signature