CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER

(FIRST) TERESA

(LAST) DREYFUSS

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

RIO HONDO COMMUNITY COLLEGE

Division, Board, Department, District, if applicable

Your Position

DISTRICT SUPERINTENDENT/PRESIDENT

☐ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: LA COUNTY 4th DISTRICT CONSOLIDATED

OVERSIGHT BOARD

Position: Board Member

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

☐ State

☐ Multi-County ____________________________

☐ City of ________________________________

☒ County of Los Angeles

☐ Other _______________________________

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

☐ Annual: The period covered is January 1, 2018, through December 31, 2018.

☐or- The period covered is 07/01/2018, through December 31, 2018.

☒ Assuming Office: Date assumed 07/01/2018

☐ Leaving Office: Date Left ____________

☐ (Check one circle.)

☐ The period covered is January 1, 2018, through the date of leaving office.

☐ 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 (must complete) ▶ Total number of pages including this cover page: __________

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

StREET

(District or Agency Address Recommended - Public Document)

3600 Workman Mill Road

Whittier CA 90601

STATE ZIP CODE

(562) 908-3403

EMAIL ADDRESS 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 ____________________________

(If the originally signed paper statement with your filing official)
NAME OF FILER
(LAST) PACHECO
(FIRST) MARY
(MIDDLE) ANN

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
RIO HONDO COMMUNITY COLLEGE DISTRICT
Division, Board, Department, District, if applicable
BOARD OF TRUSTEES
Your Position
CLERK
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
☐ County of
☐ Other

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2018, through December 31, 2018.
☐ Leaving Office: Date Left __/__/______
☐ The period covered is __/__/______, through December 31, 2018.
☐ Other
☐ The period covered is __/__/______, through the date of leaving office.
☐ Assuming Office: Date assumed __/__/______
☐ Candidate: Date of Election ________________ and office sought, if different than Part 1: ________________

4. Schedule Summary (must complete) ▶ 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
☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
3600 WORKMAN MILL ROAD
WHITTIER, CA 90602
STREET
CITY
STATE
ZIP CODE
DAYTIME TELEPHONE NUMBER
(562) 556-1639
EMAIL ADDRESS
mpacheco50@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 2/27/2019
Signature Mary Ann Pacheco
(month, day, year) (Print the originally signed paper statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Dio Hondo Community College
Division, Board, Department, District, if applicable
Avenly
Your Position
Governing Board 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
☐ Multi-County
☐ City of
☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other

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

☐ Leaving Office: Date Left __________
☐ The period covered is __________, through December 31, 2017.
☐ The period covered is __________, through the date of leaving office.
☐ Assuming Office: Date assumed __________
☐ Candidate: Date of Election __________ and office sought, if different than Part 1:

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

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
Business or Agency Address Recommended - Public Document
3600 W. Villanueva Mill Rd., Whitewater, CA 93065

STREET

CITY STATE ZIP CODE

DAYTIME TELEPHONE NUMBER (562) 569-2136

E-MAIL ADDRESS: gary.mendez@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 2/5/18
Signature ____________________________

File the originally signed statement with your filing official.

FPPC Form 700 (2017/2018)
FPPC Advice Email: advice@fppc.ca.gov
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT
Statement of Economic Interests

Cover Page

NAME OF FILER (LAST) Garcia
(First) Norma
(Middle) Edith

1. Office, Agency, or Court

Agency Name (Do not use acronyms) Rio Hondo Community College
Division, Board, Department, District, if applicable Governing Board of Trustees
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)

☐ Leaving Office: Date Left __________/________/________
☐ The period covered is __________/________/________, through December 31, 2017.
☐ The period covered is __________/________/________, through the date of leaving office.
☐ Assuming Office: Date assumed __________/________/________
☐ Candidate: Date of Election __________/________/________ and office sought, if different than Part 1:

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

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

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
9111 Richmond Avenue
Flinnbrook
CITY
STATE CA
ZIP CODE 91723

STREET
DAYTIME TELEPHONE NUMBER (213) 238-2414
E-MAIL ADDRESS nrogacina@rihondo.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 1/24/18
Signature

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

COVER PAGE

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

1. Office, Agency, or Court
Agency Name: (Do not use acronyms)
Rio Hondo Community College District
Division, Board, Department, District, if applicable
District
Your Position
Trustee

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: Rio Hondo Community College District

3. Type of Statement (Check at least one box)
☐ Leaving Office: Date Left __________
☐ The period covered is __________/_________, through December 31, 2017.
☐ The period covered is __________/_________, through __________/_________.
☐ Assuming Office: Date assumed __________
☐ If leaving office, the period covered is __________/_________.
☐ Candidiate: Date of Election __________ 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

☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
3600 Workman Mill Rd. Whittier CA 90601
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(562) 692-0921 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 2/28/2018 Signature
(month, day, year)
**STATEMENT OF ECONOMIC INTERESTS**

**COVER PAGE**

Please type or print in ink.

**NAME OF FILER**

LAST NAME: **SHAPIRO**
FIRST NAME: **MADELINE**
MIDDLE INITIAL: **RUTH**

1. **Office, Agency, or Court**

   **Agency Name** (Do not use acronyms): **RIO HONDO COMMUNITY COLLEGE GOVERNING BOARD**
   Division, Board, Department, District, if applicable: **DISTRICT 5**
   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 
   - [x] County of **LOS ANGELES**
   - [ ] Other

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

   - [ ] Leaving Office: Date Left ______/______/______
   - [ ] The period covered is ______/______/______, through December 31, 2017.
   - [ ] The period covered is ______/______/______, through the date of leaving office.
   - [ ] Assumming 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 (must complete)**

   - [x] 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: __________

5. **Verification**

   **MAILING ADDRESS:**
   **STREET:** 9846 MARYKNOLL AVE.
   **CITY:** WHITTIER
   **STATE:** CA
   **ZIP CODE:** 90605
   **DAYTIME TELEPHONE NUMBER:** (562) 693-2829
   **E-MAIL ADDRESS:** madrshap@att.net

   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:** 2/19/18
   **Signature:** **Madeleine Shapiro**

   (File the original signed statement with your filing office.)

   **FPPC Form 700 (2017/2018)**
   **FPPC Advice Email: advice@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.*

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>GENERAL DESCRIPTION OF THIS BUSINESS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>THE WALT DISNEY COMPANY</strong></td>
<td><strong>ENTERTAINMENT</strong></td>
</tr>
<tr>
<td><strong>FAIR MARKET VALUE</strong></td>
<td>$2,000 - $10,000</td>
</tr>
<tr>
<td></td>
<td>$100,001 - $1,000,000</td>
</tr>
<tr>
<td><strong>NATURE OF INVESTMENT</strong></td>
<td>Stock</td>
</tr>
<tr>
<td></td>
<td>Partnership</td>
</tr>
<tr>
<td>IF APPLICABLE, LIST DATE:</td>
<td>1/1/17</td>
</tr>
<tr>
<td></td>
<td>ACQUIRED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>GENERAL DESCRIPTION OF THIS BUSINESS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FAIR MARKET VALUE</strong></td>
<td>$2,000 - $10,000</td>
</tr>
<tr>
<td></td>
<td>$100,001 - $1,000,000</td>
</tr>
<tr>
<td><strong>NATURE OF INVESTMENT</strong></td>
<td>Stock</td>
</tr>
<tr>
<td></td>
<td>Partnership</td>
</tr>
<tr>
<td>IF APPLICABLE, LIST DATE:</td>
<td>1/1/17</td>
</tr>
<tr>
<td></td>
<td>ACQUIRED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>GENERAL DESCRIPTION OF THIS BUSINESS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FAIR MARKET VALUE</strong></td>
<td>$2,000 - $10,000</td>
</tr>
<tr>
<td></td>
<td>$100,001 - $1,000,000</td>
</tr>
<tr>
<td><strong>NATURE OF INVESTMENT</strong></td>
<td>Stock</td>
</tr>
<tr>
<td></td>
<td>Partnership</td>
</tr>
<tr>
<td>IF APPLICABLE, LIST DATE:</td>
<td>1/1/17</td>
</tr>
<tr>
<td></td>
<td>ACQUIRED</td>
</tr>
</tbody>
</table>

**Comments:**

---

**FPPC Form 700 (2017/2018) Sch. A-1**

FPPC Advice Email: advice@fppc.ca.gov

FPPC Toll-Free Hotline: 866/377-2772 | www.fppc.ca.gov