STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER: TERESA DREYFUSS

1. Office, Agency, or Court

Agency Name (Do not use acronyms):
Rio Hondo Community College
Division, Board, Department, District, if applicable:
(Acting Superintendent/President)

Agency: __________________________ Position: __________________________

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

☐ State
☐ Multi-County
☐ City of
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ County of
☐ Other
☐ Agency Jurisdiction

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

☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __________
☐ -or- The period covered is __________ through December 31, 2020.
☐ Other
☐ The period covered is __________, through the date of leaving office.

☒ Assuming Office: Date assumed 07/30/2020

☐ 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
Rio Hondo College 3600 Workman Mill Rd
WHITTIER, CA 90601

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER
(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 01/13/21
(month, day, year)

Signature __________________________

(File the originally signed paper statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A Public Document

NAME OF FILER

Santana

Vicky

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Rio Hondo Community College

Division, Board, Department, District, if applicable
Member of the Board of Trustees

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
☐ County of ______________
☐ Other ______________

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ___________
☐ Asssuming 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: 1

Schedules attached

☒ Schedule A-1 - Investments – schedule attached
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☒ 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
3600 Workman Mill Road
Whittier, CA 90601

Daytime Telephone Number
(562) 500-9554

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 3/23/2021

Signature ____________________________

E-Filed By Vicky Santana

90601

Filing Official Use Only

Confirmation Number: CAC1378C

3/23/2021 8:49:04 PM

SAN: 043000025-LAC-0025
Leaving Office:

Date Left

(Choose one circle)

The period covered is January 1, 2020, through the date of leaving office.

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

Annual:
The period covered is January 1, 2020, through December 31, 2020.

The period covered is , through December 31, 2020.

Jurisdiction of Office (Check at least one box)

☐ State

☐ Multi-County ____________________________

☐ City of ____________________________

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)

☐ County of ____________________________

☒ Other Agency’s Jurisdiction

Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐ Leaving Office: Date Left __________

☐ The period covered is January 1, 2020, through the date of leaving office.

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

☐ Assumed Office: Date assumed ________________

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

Schedule Summary (must complete)

Total number of pages including this cover page: 1

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☒ Schedule A-1 - Investments – schedule attached

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☐ Schedule D - Income – Gifts – schedule attached

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

☐ None - No reportable interests on any schedule

Verification

MAILING ADDRESS
(Business or Agency Address Recommended - Public Document)
3600 Workman Mill Road
Whittier CA 90601

DAYTIME TELEPHONE NUMBER
(323) 359-6142

E-MAIL ADDRESS
lomeliforrhc2018@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 3/25/2021 (month, day, year)

Signature ____________________________

E-Filed By Rosaelva Lomeli

(Files the originally signed paper statement with your filing official.)
NAME OF FILER: Valladares  
(LAST) Oscar  
(FIRST) (MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Mental Health, Department of

Division, Board, Department, District, if applicable

Your Position
Deputy Public Conservator/ Administrator II

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

Agency: Rio Hondo Community College

Position: Member of the Board of Trustees

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, 2020, through December 31, 2020.

☐ Leaving Office: Date Left __________

☒ The period covered is ________________, through December 31, 2020.

☐ Assuming Office: Date assumed __________

☐ Candidate: Date of Election __________ and office sought, if different than Part 1: __________

4. Schedule Summary (must complete)

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

☐-or-

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS  
550 South Vermont Avenue  
Los Angeles  
CA  
90020

STREET  
(City or Agency Address Recommended - Public Document)

CITY  

STATE  

ZIP CODE  

DAYTIME TELEPHONE NUMBER  
(323) 273-7422

E-MAIL ADDRESS  
valladares@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 3/24/2021  
(month, day, year)

Signature  

E-Filed By Oscar Valladares

(File the originally signed paper statement with your filing official.)
Leaving Office:

Date Left

(Check one Circle)

The period covered is January 1, 2019, through the date of leaving office.

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

Annual:

The period covered is January 1, 2019, through December 31, 2019.

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STATEMENT OF ECONOMIC INTERESTS

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SAN: 043000025-LAC-0025

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(Check one Circle)

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Annual:

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STATEMENT OF ECONOMIC INTERESTS

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STATEMENT OF ECONOMIC INTERESTS

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

Annual:

The period covered is January 1, 2019, through December 31, 2019.

The period covered is , through December 31, 2019.
### STATEMENT OF ECONOMIC INTERESTS

**COVER PAGE**

**A Public Document**

**SAN: 043000025-LAC-0025**

**Confirmation Number: C0CE8947**

**Date Initial Filing Received**

**3/26/2021 3:59:54 PM**

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**NAME OF FILER**

<table>
<thead>
<tr>
<th>LAST</th>
<th>(LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medina Diaz</td>
<td>Anais</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

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

- **Agency Name (Do not use acronyms)**
  - Rio Hondo Community College

- **Division, Board, Department, District, if applicable**
  - Member of the Board of Trustees

- 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**
- **Agency’s Jurisdiction**

---

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

- **Annual:** The period covered is January 1, 2020, through December 31, 2020.

- **Leaving Office:**
  - **Date Left:**
  - **(Check one Circle)**
  - The period covered is January 1, 2020, through the date of leaving office.
  - The period covered is , through the date of leaving office.

- **Assuming Office:**
  - **Date assumed:** 3/11/2021

- **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:** 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**

3600 Workman Mill Road

Whittier, CA 90601

**DAYTIME TELEPHONE NUMBER**

(626) 393-0904

**E-MAIL ADDRESS**

amedinadiaz@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**

3/26/2021  

**Signature**

(Flat the originally signed paper statement with your filing official.)

---

**E-Filed By Anais Medina Diaz**

**Confirmation Number:** C0CE8947

**3/26/2021 3:59:54 PM**

---

FPPC Form 700 - Cover Page (2020/2021)  

advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
**A PUBLIC DOCUMENT**

**NAME OF FILER**  
(LEAST) Mendez  
(FIRST) Gary  
(MIDDLE) Gabriel

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

Area 4  
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  
- [x] Multi-County  
- [x] City of

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

- [ ] Annual: The period covered is January 1, 2019, through December 31, 2019.
- [x] Leaving Office: Date Left 12/11/2020  
(Outside of Box)

- [ ] The period covered is January 1, 2019, through the date of leaving office.
- [ ] The period covered is 1/1/2020, through the date of leaving office.

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
- [X] None - No reportable interests on any schedule
- [ ] Schedule C - Income, Loans, & Business Positions - schedule attached
- [ ] Schedule D - Income - Gifts - schedule attached
- [ ] Schedule E - Income - Gifts - Travel Payments - schedule attached

5. **Verification**

MAILING ADDRESS  
3600 Workman Mill Road  
Whittier  
CA  
90601

STREET  

CITY  

STATE  

ZIP CODE

DAYTIME TELEPHONE NUMBER  
( )

EMAIL ADDRESS  
garymendez1@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  
11/11/21  
Signature  

[File the original signed paper statement with your filing official.]
STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A Public Document

Please type or print in ink.

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

Garcia Norma Edith

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, Retired Judge, Pro Tem 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, 2019, through December 31, 2019.
☐ Leaving Office: Date Left __8/8/2020__
☐ The period covered is ______________, through December 31, 2019.
☐ The period covered is January 1, 2019, through the date of leaving office.

☐ Assuming 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: ______________

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

►-or-

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
3600 Workman Mill Road
Whittier CA 90601

STREET
CITY STATE ZIP CODE

(626) 588-5373

daytime telephone number

(626) 588-5373

E-MAIL ADDRESS
negarcia@parks.lacounty.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 ____________________________

(7/23/2020)

Signature ____________________________

(If the originally signed paper statement with your filing official.)

E-Filed By Norma Garcia

Confirmation Number: C191EF5F
7/23/2020 6:41:18 PM

Filing Official Use Only

Advising party@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov