

**Officeholder and Candidate  
Campaign Statement –  
Short Form**

Date of election if applicable: (Month, Day, Year)  _____ _____	<input type="checkbox"/> <b>Amendment</b> (Explain Below)  _____ _____
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Date Stamp  CITY CLERK OFFICE  2021 JUL 20 P 5 18	CALIFORNIA FORM <b>470</b>  For Official Use Only
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CITY OF MONTEREY PARK

1. Statement Covers Calendar Year 20 21 .

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE		
FRED SORNOSO		
STREET ADDRESS		
CITY	STATE	ZIP CODE
MONTEREY PARK	CA	91754
AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS	

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD	
COUNCIL MEMBER	
JURISDICTION (LOCATION)	DISTRICT NUMBER (IF APPLICABLE)
MONTEREY PARK	3

**4. Committee Information**


List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER
N/A		

**5. Verification**

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7/8/2021 DATE

By  SIGNATURE OF OFFICEHOLDER OR CANDIDATE