

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

Date of election if applicable:  
(Month, Day, Year)

n/a

**Amendment** (Explain Below)

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Date Stamp  
MPK CITY CLERK'S OFFICE  
JUL 15 '25 AM 10:19

**CALIFORNIA FORM 470**  
For Official Use Only

1. Statement Covers Calendar Year 20 25 .

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
City of Monterey Park

STREET ADDRESS  
[REDACTED]

CITY STATE ZIP CODE  
Monterey Park CA 91754

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
626-823-4558 vinhhtngo.D5@gmail.com

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
City Council Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
Monterey Park, Los Angeles County

**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
None		

**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 July 8, 2025  
DATE

By Vinh T. Ngo   
Digitally signed by Vinh T. Ngo  
Date: 2025.07.08 21:48:30 -07'00'  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE