

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

(Government Code Section 84206)

Type or print in ink.

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

☐ **Amendment** (Explain Below)

Date Stamp

CITY CLERK OFFICE

2012 JAN 27 P 12:01

CITY OF MONTEREY PARK

SHORT FORM

**CALIFORNIA
FORM 470**

For Official Use Only

1. Statement Covers Calendar Year 20 11 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Joseph Leon

STREET ADDRESS

CITY

STATE

ZIP CODE

MONTEREY PARK

CA

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

City Treasurer

JURISDICTION (LOCATION)

Monterey Park

DISTRICT NUMBER
(IF APPLICABLE)

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 \$1,000 and that I will spend less than \$1,000 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

01/27/12

DATE

By

Joseph Leon

SIGNATURE OF OFFICEHOLDER OR CANDIDATE