

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

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

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**Amendment** (Explain Below)

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Date Stamp	<b>CALIFORNIA FORM 470</b>
For Official Use Only	
CITY CLERK OFFICE	
2023 JUL 12 PM 6:03	

1. Statement Covers Calendar Year 20 23

CITY OF MONTEREY PARK

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
VINH T. NGO

STREET ADDRESS  
[REDACTED]

CITY STATE ZIP CODE  
MONTEREY PARK CA 91755

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
626-823-4558

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
MONTEREY PARK CITY COUNCIL

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
MONTEREY PARK, LA COUNTY, CA 5

**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
<u>NONE</u>		

**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 7/12/2023  
DATE

By [Signature]  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE