

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

7/27/21 (✓)

RECEIVED BY  
LOS ANGELES COUNTY

Date of election if applicable:  
(Month, Day, Year) 2021 JUL 29 PM 12:12

CAMPAIGN FINANCE

Date Stamp <b>LOS ANGELES COUNTY</b> 2021 JUL 29 CAMPAIGN FINANCE	<b>CALIFORNIA FORM 470</b> For Official Use Only
--	---

1. Statement Covers Calendar Year 20 21.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

Hermila Esthela Torres de Siegrist

STREET ADDRESS

CITY

El Monte

AREA CODE/DAYTIME PHONE NUMBER

626-622-1794

STATE

CA

ZIP CODE

91732

OPTIONAL: FAX / E-MAIL ADDRESS

hetds@yahoo.com

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD

El Monte Union High School District

JURISDICTION (LOCATION)

Los Angeles County--Several Cities

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

**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 27, 2021  
DATE

By \_\_\_\_\_  
DATE