

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

Date of election if applicable: (Month, Day, Year) <hr/>	<input type="checkbox"/> Amendment (Explain Below) <hr/>	Date Stamp CITY CLERK OFFICE 2021 JUL 13 P 3:47	CALIFORNIA FORM 470 For Official Use Only
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1. Statement Covers Calendar Year 20 21.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

PETER CHAN

CITY STATE ZIP CODE

MONTEREY PARK

CA 91755

AREA CODE/DAYTIME PHONE NUMBER

626-548-9722

OPTIONAL: FAX / E-MAIL ADDRESS

JURISDICTION (LOCATION)

MONTEREY PARK

DISTRICT NUMBER

MEMBER

4. Committee Information

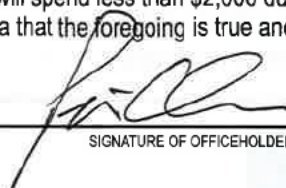
List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

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 7-13-2021
DATE

By 
SIGNATURE OF OFFICEHOLDER OR CANDIDATE