

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

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NAME OF FILER (LAST) (FIRST) MUNOZ Cecilia 2024 APR 8 PM 3:09

1. Office, Agency, or Court
Agency Name (Do not use acronyms) CITY OF WEST COVINA
Division, Board, Department, District, if applicable Councilmember, District 3
Your Position

CITY OF WEST COVINA
CITY CLERK'S OFFICE

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

State Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County County of Los Angeles
 City of West Covina Other _____

3. Type of Statement (Check at least one box)

Annual: The period covered is January 1, 2023, through December 31, 2023.
-or- The period covered is _____ through December 31, 2023.
Assuming Office: Date assumed _____
Leaving Office: Date Left _____ (Check one circle.)
The period covered is January 1, 2023, through the date of leaving office.
-or- The period covered is _____ through the date of leaving office.
 Candidate: Date of Election Nov 5, 2024 and office sought, if different than Part 1: same

4. Schedule Summary (required)

► Total number of pages including this cover page: 1

Schedules attached

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached

-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
DAY TIME TELEPHONE NUMBER EMAIL ADDRESS

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 8/8/2024 Signature _____
(month, day, year)