

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
*A Public Document*

**3/1/2023 1:24:28 PM**

SAN: 043000025-LAC-0025

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
**Salcedo Carlos G**

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)  
El Monte Union High School District  
Division, Board, Department, District, if applicable Your Position  
Member of the Board of Trustees

► 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 \_\_\_\_\_
- City of \_\_\_\_\_  Other District

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

- Annual:** The period covered is January 1, 2022, through December 31, 2022.  **Leaving Office:** Date Left \_\_\_\_\_ (Check one Circle)
- or-** The period covered is \_\_\_\_\_, through December 31, 2022.  The period covered is January 1, 2022, through the date of leaving office.
- Assuming Office:** Date assumed \_\_\_\_\_  The period covered is \_\_\_\_\_, through the date of leaving office.
- Candidate:** Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary (required)**

► Total number of pages including this cover page: 1

**Schedules attached**

- Schedule A-1 - Investments** – schedule attached  **Schedule C - Income, Loans, & Business Positions** – schedule attached
- Schedule A-2 - Investments** – schedule attached  **Schedule D - Income – Gifts** – schedule attached
- Schedule B - Real Property** – 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)  
**3537 Johnson Avenue El Monte CA 91731**  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
**(616) 444-9005 Carlos.salcedo@emuhsd.org**

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 3/1/2023 Signature \_\_\_\_\_ E-Filed By Carlos Salcedo  
(month, day, year) (File the originally signed paper statement with your filing official.)