

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
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Please type or print in ink.

NAME OF FILER (LAST) MONTEIRO (FIRST) ALEXANDRE (ALEX) (MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF HAWTHORNE

MAYOR

Division, Board, Department, District, if applicable

Your Position

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► 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 HAWTHORNE

Other _____

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

Annual: The period covered is January 1, 2019, through December 31, 2019.

Leaving Office: Date Left ____/____/____
(Check one circle.)

-or-

The period covered is ____/____/____, through December 31, 2019.

The period covered is January 1, 2019, through the date of leaving office.

-or-

The period covered is ____/____/____, through the date of leaving office.

Assuming Office: Date assumed ____/____/____

Candidate: Date of Election 11/3/2020 and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _____

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 12413 RAMONA AVE HAWTHORNE CA 90250

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

4455 W. 126th STREET HAWTHORNE, CA 90250

DAYTIME TELEPHONE NUMBER

(310) 686-5464

EMAIL ADDRESS

MONTEIRO4MAYOR2020@gmail.com

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 07/28/2020
(month, day, year)

Signature [Signature]
(File the originally signed paper statement with your filing official.)