

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Figueroa Frank C.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Coachella

Division, Board, Department, District, if applicable

City Council member

Your Position

► 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 Coachella

☐ Other

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

☐ Annual: The period covered is January 1, 2021, through
December 31, 2021.

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

-or-

The period covered is / / , through
December 31, 2021.

☐ The period covered is January 1, 2021, through the date of
leaving office.

-or-

☐ Assuming Office: Date assumed / /

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

☒ Candidate: Date of Election 2022 and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► 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)

P.O. Box 669

Coachella

CA

92236

DAYTIME 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 08/06/2022
(month, day, year)

Signature

Print

Clear