Candidate Intention Statement

Check One: ☐ Initial ☐ Amendment [Explain]

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)
Solis, Leonardo

STREET ADDRESS

CITY
Ontario

STATE
CA

ZIP CODE
91762

OFFICE SOUGHT (POSITION TITLE)
OUSD School Board Member

AGENCY NAME

DISTRICT NUMBER (If applicable)

□ NON-PARTISAN

PARTY:

□ State (Complete Part 2)
□ City ☑ County ☐ Multi-County:


2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

2014 Primary/general election ☐ Special/runoff election

☐ I accept the voluntary expenditure ceiling for the election stated above.

☐ I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

☐ I did not exceed the expenditure ceiling in the primary or special election held on ________ and I accept the voluntary expenditure ceiling for the general or special run-off election.

☐ On ________ I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

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

Executed on __________ (month, day, year)

Signature:

FPPC Form 501 (April/2011)
FPPC Toll-Free Helpline: 800/ASK-FPPC (866/275-3772)