Candidate Intention Statement	ドロ CALIFORNIA 501
Check One: Amendment (Explain)	JUL 2 0 2022 For Official Use Only Kings County Elections
1. Candidate Information:	
Solis Guadalupe	AX NUMBER (optional) EMAIL (optional)
STREET ADDRESS CITY	STATE ZIP CODE CA 93245
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME Lemoure High School Bourd of Trustee OFFICE JURISDICTION State (Complete Part 2.)	STRICT NUMBER, if applicable. NON-PARTISAN OFFICE PARTY PREFERENCE: (Check one box, if applicable.)
City County Multi-County: (Name of Multi-County Jurisdiction)	7022 (Year of Election) SPECIAL / RUNOFF
 (Check one box) 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 ceiling for the general or special run-off election. 	and I accept the voluntary expenditure
(Mark if applicable) On,I contributed personal funds in excess of the expenditure ceiling for	or the election stated above.
3. Verification:	
I certify under penalty of perjury under the laws of the State of California that the foregoing	

FPPC Form 501 (August/2018)
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