NAME OF FILER
Ontiveros

(LAST) Richard

(First) Bob

(MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Transportation
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
□ Multi-County ____________________
□ City of __________________________

□ Judge or Court Commissioner (Statewide Jurisdiction)
□ County of _______________________
□ Other Public School District

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

☑ Annual: The period covered is January 1, 2013, through December 31, 2013.

-or-

The period covered is _________/_____/________, through December 31, 2013.

□ Assuming Office: Date assumed _________/_____/________

□ Leaving Office: Date Left _________/_____/________ (Check one)

- The period covered is January 1, 2013, through the date of leaving office.

- The period covered is _________/_____/________, through the date of leaving office.

□ Candidate: Election year _________/_____/________ and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or “None.”

☑ None - No reportable interests on any schedule

☐ Schedule A-1 - Investments - schedule attached
☐ Schedule A-2 - Investments - schedule attached
☐ Schedule B - Real Property - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

Total number of pages including this cover page: ___

5. Verification

MAILING ADDRESS
2455 Carmicheal Dr
STREET

CITY Chico
STATE Ca
ZIP CODE 95926

DAYTIME TELEPHONE NUMBER (530) 891-3097
E-MAIL ADDRESS (OPTIONAL) bontiveros@chicousd.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 02/10/2014

Signature ________________________

(Fill the originally signed statement with your filing official)