## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received Official Use Only

Please type or print in ink.

NAME OF FILER	(LAST)		(FIRST)		(MIDDLE)	
Ontiveros	Richard			Robert		
1. Office, Agency, or Co	ourt				_	
Agency Name (Do not use a	eronyms)	•			- 10.4	
Chico Unified School I						
Division, Board, Department, District, if applicable			Your Position			
Transportation		Supervisior				
▶ If filing for multiple position	ns, list below or on an attach	nment. (Do not us	e acronyms)			
Agency:	Agency:		Position:			
2. Jurisdiction of Office	(Check at least one box)	ı				
[T] State		☐ Judge or Court Commissioner (Statewide Jurisdiction)				
Multi-County		County of				
_ ,	City of		Other School District			
			V One			
3. Type of Statement (c	heck at least one box)					
Annual: The period covered is January 1, 2014, through December 31, 2014.			Leaving Office: Date Left/(Check one)			
-or- The period cove December 31, 2	ered is/	, through	<ul><li>The period</li><li>leaving</li></ul>		, 1, 2014, through the date of	
Assuming Office: Date assumed		The period covered is/, through the date of leaving office.				
Candidate: Election year		nd office sought, if	different than Part 1:			
4. Schedule Summary			\$41 (\$24) (\$24) (\$25) \$4 (\$27) \$74 (\$24) \$4 (\$27) \$74 (\$24) \$4 (\$27) \$74 (\$2	ovotorrovovovo vy voki dododavavadovo odedvavatak	volonio i i i i i i i i i i i i i i i i i i	
Check applicable sche	dules or "None."	► Total	number of page	es including this o	cover page:	
Schedule A-1 - Investme	nts - schedule attached	[	Schedule C - Inc	come, Loans, & Busine	ss Positions - schedule attached	
Schedule A-2 - Investmen	Schedule A-2 - Investments - schedule attached		Schedule D - Income - Gifts - schedule attached			
Schedule B - Real Prope	erty – schedule attached	[	Schedule E - Inc	come – Gifts – Travel F	Payments - schedule attached	
-or-  ✓ None - No reportable interests on any schedule						
5. Verification			CALAMATAN (LA) OF THE THE WAYART FOR THE TAILOR .	over disease a business a constitution of the		
	TREET neaded - Public Document)	CITY		STATE	ZIP CODE	
2455 Carmichael Dr	ionada - i done becameny	Chico		Са	95928	
DAYTIME TELEPHONE NUMBER			E-MAIL ADDRESS			
( 530 ) 891-3097	·		bontiveros@chicousd.org			
I have used all reasonable dilig herein and in any attached sol					wledge the information contained	
I certify under penalty of pe	rjury under the laws of the	State of Californ	ia that the foregoin	g is true and correct.		
Date Signed 03/19/2015 Signature						
Date Signed	Si	Signature (File the originally signed statement with your filing official.)				