



Candidate Intention Statement

Date Stamp AUG 06 2024	CALIFORNIA FORM 501
Imperial County	
<small>For Official Use Only</small>	

Check One: Initial Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Olesh Ronald P. DAYTIME TELEPHONE NUMBER (760) 550-5204 FAX NUMBER (optional) _____ EMAIL (optional) _____

STREET ADDRESS 2023 Rutherford Rd CITY Brawley STATE CA ZIP CODE 92227

OFFICE SOUGHT (POSITION TITLE) Mulberry School District Board Member DISTRICT NUMBER, if applicable. NON-PARTISAN OFFICE

OFFICE JURISDICTION Imperial (Name of Multi-County Jurisdiction) PARTY PREFERENCE: (Check one box, if applicable.)

State (Complete Part 2.) County Multi-County: Nov 2024 PRIMARY / GENERAL SPECIAL / RUNOFF

2. State Candidate Expenditure Limit Statement:

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

(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 _____ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

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 8/6/24 (month, day, year) Signature Ron Olesh (Candidate)