1. Statement Covers Calendar Year 2018.

2. Officeholder or Candidate Information
   - **NAME OF OFFICEHOLDER OR CANDIDATE**: Marsha Solorio
   - **STREET ADDRESS**: West Covina
   - **CITY**: West Covina
   - **STATE**: CA
   - **ZIP CODE**: 91790

3. Office Sought or Held
   - **OFFICE SOUGHT OR HELD**: Treasurer
   - **JURISDICTION (LOCATION)**: City of West Covina

4. Committee Information
   - **COMMITTEE NAME AND I.D. NUMBER**: Marsha Solorio for Treasurer 2018
   - **COMMITTEE ADDRESS**: West Covina, CA 91790
   - **NAME OF TREASURER**: Noe M. Rios

5. Verification
   - I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than $2,000 and that I will spend less than $2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

   **Executed on**: 9/24/18

   **By**: [Signature]

   **Date**: 9/24/18