Can distant Intention Statement	RECE			_
			FORM 501	
Check One: Initial Amendment (Explain)	AUG 10		For Official Use Only	
1. Candidate Information:	l			_
NAME OF CANDIDATE (Last, First, Middle Initial) DAYTIME TELEPHONE NUMBER STREET ADDRESS CITY	FAX NUMBER (optional) (E-MAIL (optional) Drid Cyct ZIP CODE	forthe bride	F Grail
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME C'TY OF PACE, CA	DISTRICT NUMBER	R, if applicable. NO	IN-PARTISAN Y:	_
DEFICE JURISDICTION State (Complete Part 2.) U City County Multi-County: (Name of Multi-County Jurisdiction)	(Year o	of Election)		_
2. State Candidate Expenditure Limit Statement: (CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.) (Year of Election) Primary/general election (Year of Election) Special/runoff election				
(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: O I did not exceed the expenditure ceiling in the primary or special election held on:	/ and I acce	pt the voluntary e	expenditure ceiling for	
(Merk if eppliceble) 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 Executed on (month, day, year) Signature (Candidate)	g is true and correct.		FPPC Form 501(e: advice@fppc.ca.gov (866/	

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