



**Candidate Intention Statement**

Check One:  Initial  Amendment (Explain) Change from party to Non-Partisan

Date Stamp	<b>CALIFORNIA FORM 501</b> For Official Use Only

**1. Candidate Information:**

NAME OF CANDIDATE (Last, First, Middle Initial) Flores Vickie T DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) ( ) E-MAIL (optional)

STREET ADDRESS [REDACTED] CITY STATE ZIP CODE

OFFICE SOUGHT (POSITION TITLE) Pacifica City Council AGENCY NAME [REDACTED] DISTRICT NUMBER, if applicable. PARTY:  NON-PARTISAN

OFFICE JURISDICTION  State (Complete Part 2.)  City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) 2018 (Year 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** \_\_\_\_\_ **Special/runoff election**  
(Year of 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:

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 08/06/2018  
(month, day, year)

Signature *Vickie Flores*  
(Candidate)

FPPC Form 501 (Jan/2016)  
FPPC Advice: advice@fppc.ca.gov (866/275-3772)  
www.fppc.ca.gov