

Candidate Intention Statement

Date Stamp
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JUL 13 2020
City Clerk's Office
City of Los Alamitos

CALIFORNIA FORM **501**
For Official Use Only

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE: [REDACTED] FAX NUMBER (optional): [REDACTED]
STREET ADDRESS: DEAN GROSE CITY: Los Alamitos CA STATE: CA ZIP CODE: 90720
OFFICE SOUGHT (POSITION TITLE): COUNCIL MEMBER AGENCY NAME: Los Alamitos DISTRICT NUMBER, if applicable: DIST-1 NON-PARTISAN OFFICE
OFFICE JURISDICTION: State (Complete Part 2.) City County Multi-County: Los Alamitos (Name of Multi-County Jurisdiction) 2020 (Year of Election) PRIMARY / GENERAL SPECIAL / RUNOFF
(Check one box, if applicable.)

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 information provided is true and correct.

Executed on 07-13-2020 (month, day, year) Signature: [REDACTED]