Candidate Intention Statement		D-1- C4	CANDIDATE INTENTION STATEMENT	
walland illerinier ampoilibile	Type or Print in Ink.	Date St 10 5 0 5 0 5 0 5 0 5 0 5 0 5 0 5 0 5 0 5	CALIFORNIA 501	
Check One: Initial Amendment (Explain)		1616 AUS - 6	For Official Use Only	
1. Candidate Information:				
NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	E-MAIL (optional)	
Edgar, Troy D.		( )		
STREET ADDRESS	CITY	STATE	ZIP CODE	
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME	Los Alamitos	Ca DISTRICT NUMBER,	90720 , if applicable. NON-PARTISAN	
City Council Member City of Los Ala	mitos	DIOTION NOMBER		
OFFICE JURISDICTION  State (Complete Part 2.)	IIIIUS		PARTY:	
☑ City ☐ County ☐ Multi-County: ————	(Name of Multi-County Jurisdiction)		10 Election)	
(Year of Election) (Year of Election)  (Check one box)				
☐ I accept the voluntary expenditure ceiling for the election s	stated above.			
☐ I do not accept the voluntary expenditure ceiling for the el Amendment:	ection stated above.			
O I did not exceed the expenditure ceiling in the primary general or special run-off election.	or special election held on:	and I accept th	ne voluntary expenditure ceiling for the	
(Mark if applicable)				
On/, I contributed personal funds in exce	ess of the expenditure ceiling for t	he election stated above.		
3. Verification:				
I certify under penalty of perjury under the laws of the State	of California that the foregoing is	thus and correct		
Executed on August 5, 2010 (month, day, year)	Signature			
		FPPC	FPPC Form 501 (January/05) Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)	