

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp RECEIVED CITY OF LOS ALAMITOS 2015 SEP 17 PM 12:29	CALIFORNIA FORM 501
	For Official Use Only

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) WILSON, JOSHUA, S	DAYTIME TELEPHONE NUMBER [REDACTED]	FAX NUMBER (optional) ()	E-MAIL (optional)
STREET ADDRESS [REDACTED]	CITY LOS ALAMITOS	STATE CA	ZIP CODE 90720
OFFICE SOUGHT (POSITION TITLE) COUNCIL MEMBER	AGENCY NAME CITY OF LOS ALAMITOS	DISTRICT NUMBER, if applicable. N/A	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ <small>(Name of Multi-County Jurisdiction) (Year of Election)</small>			

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

____ Primary/general election (Year of 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 information provided is true and correct.

Executed on Sep 17, 2015
(month, day, year)

Signature _____

