

Candidate Intention Statement

RECEIVED Date Stamp JUL 18 2016 City Clerk's Office City of Los Alamitos CALIFORNIA FORM 501 For Official Use Only

Check One: [X] Initial [] Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Grose, Dean DAYTIME TELEPHONE NUMBER FAX NUMBER (optional) E-MAIL (optional) STREET ADDRESS CITY Los Alamitos STATE CA ZIP CODE 90720 OFFICE SOUGHT (POSITION TITLE) Council Member AGENCY NAME City of Los Alamitos DISTRICT NUMBER, if applicable. [X] NON-PARTISAN OFFICE JURISDICTION [] State [X] City [] County [] Multi-County: Los Alamitos (Name of Multi-County Jurisdiction) 2016 (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.)

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 7/18/16 Signature _____ (month, day, year)