Candidate Intention Statement

Check One:  ☑ Initial  □ Amendment (Explain) ________________________________

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)  Riccardo D. Marchi
STREET ADDRESS ____________________________________________
OFFICE SOUGHT (POSITION TITLE)  Member of the City Council

DAYTIME TELEPHONE NUMBER  FAX NUMBER (optional)  E-MAIL (optional)
CITY  Les Alamitos  STATE  CA  ZIP CODE  90720

OFFICE JURISDICTION ☑ City  □ County  □ Multi-County: ____________________________
(NAME of Multi-County Jurisdiction) ____________________________
(YEAR of Election)

2. State Candidate Expenditure Limit Statement:
(CalIFERS 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)  (Year of Election)

☐ 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.

☐ 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 8-10-12  (month, day, year)  Signature ________________________________

FPPC Form 501 (April 2011)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)