Candidate Intention Statement

Check One: ☒ Initial  ☐ Amendment (Explain) ________________________________

CITY CLERK

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)  Poreckay Dennis E

STREET ADDRESS __________________________________________________________

DAYTIME TELEPHONE NUMBER ____________________________ FAX NUMBER (optional) __________________

EMAIL (optional) _______________________________________________________

CITY ___________________________________ STATE  ____ Zip Code  ____________

OFFICE SOUGHT (POSITION TITLE) __________________________________________

AGENCY NAME ___________________________________________________________

DISTRICT NUMBER, if applicable ___________________________________________

NON-PARTISAN OFFICE ☐

PARTY PREFERENCE: ☐ PRIMARY / GENERAL ☐ SPECIAL / RUNOFF

OFFICE JURISDICTION ☑ City  ☐ County  ☐ Multi-County  __________________________________

齐全 Multi-County Jurisdiction)

	

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

☐ 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 ______/_____/______ (month, day, year)  Signature __________________________

Candidate)

FPPC Form 501 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov