

Candidate Intention Statement

Date Stamp RECEIVED JUL 07 2020 CITY CLERK	CALIFORNIA FORM 501 For Official Use Only
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Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Elizabeth Wallack	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional) (N/A)	EMAIL (optional)
STREET ADDRESS	CITY Petaluma	STATE CA	ZIP CODE 94952
OFFICE SOUGHT (POSITION TITLE) City Council	AGENCY NAME City of Petaluma	DISTRICT NUMBER, if applicable N/A	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE PARTY PREFERENCE: (Check one box, if applicable.) <input checked="" type="checkbox"/> PRIMARY / GENERAL <input type="checkbox"/> SPECIAL / RUNOFF
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County:	N/A (Name of Multi-County Jurisdiction)	2020 (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.)

(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.

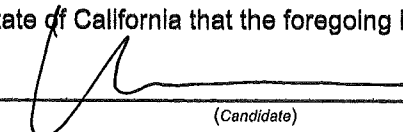
(Mark if applicable)

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 June 29 2020
(month, day, year)

Signature 
(Candidate)