Candidate Intention Statem	Date Stamp	CALIFORNIA 501	
Check One: ☑ Initial ☐ A	mendment (Explain)	RECEIV	For Official Use Only
Enided []/d	Heriament (Explain)	JUL 07 20	20
WORKSONARAON		CITY CLE	RK
1. Candidate Information:			
NAME OF CANDIDATE (Last, First Middle Initial) Elizabeth Wallack	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional) Ef (N/A)	AAIL (optional)
STREET ADDRESS	CITY		CODE
	Petaluma		1952
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	NON-PARTISAN OFFICE
City Council	City of Petaluma	N/A P	ARTY PREFERENCE:
OFFICE JURISDICTION State (Complete Part 2.)			(Check one box, if applicable.)
	N/A	2020	PRIMARY / GENERAL
City County Multi-County:	(Name of Multi-County Jurisdiction)	(Year of Election)	SPECIAL / RUNOFF
☐ I do not accept the voluntary ex	re ceiling for the election stated above.		
Amendment: O I did not exceed the expendent of the general or second or the general or second o	diture ceiling in the primary or special election he pecial run-off election.	eld on/ and I ad	ccept the voluntary expenditure
(Mark if applicable)		· ·	
On,I contribut	ed personal funds in excess of the expenditure of	ceiling for the election stated abo	Ve.
3. Verification:			
I certify under penalty of perjury un	der the laws of the State of California that the fo	regoing is true and correct.	
Executed on June 29 202	20Signature _		
(month, day, year)	ė –		