

LOCAL

# Candidate Intention Statement

RECEIVED  
JUL - 2 2018  
CITY OF SONOMA

CALIFORNIA FORM 501  
For Official Use Only



Check One:  Initial  Amendment (Explain) \_\_\_\_\_

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Harvey, Logan, M DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) ( ) E-MAIL (optional) [REDACTED]@gmail.com

STREET ADDRESS [REDACTED] CITY Sonoma STATE CA ZIP CODE 95476

OFFICE SOUGHT (POSITION TITLE) City Council Member AGENCY NAME City of Sonoma DISTRICT NUMBER, if applicable.  NON-PARTISAN PARTY: Democrat

OFFICE JURISDICTION  
 State (Complete Part 2.)  
 City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) 2018 (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.)

2018 Primary/general election (Year of 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 April 17<sup>th</sup> 2018  
(month, day, year)

Signature: [REDACTED]  
(Candidate)