

# Candidate Intention Statement

Date Stamp <i>Received in the City Clerk's Office on August 7, 2020</i>	<b>CALIFORNIA FORM 501</b> For Official Use Only
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Check One:  Initial  Amendment (Explain) \_\_\_\_\_

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) DHALIWAL BHAJAN SINGH DAYTIME TELEPHONE NUMBER \_\_\_\_\_ FAX NUMBER (optional) \_\_\_\_\_ EMAIL (optional) CRONA123@YAHOO.COM

STREET ADDRESS \_\_\_\_\_ CITY LAGUNA NIGUEL STATE CA ZIP CODE 92677

OFFICE SOUGHT (POSITION TITLE) MEMBER OF THE CITY COUNCIL AGENCY NAME \_\_\_\_\_ DISTRICT NUMBER, if applicable. 5  NON-PARTISAN OFFICE

OFFICE JURISDICTION (Check one box, if applicable.)

State (Complete Part 2.)  PRIMARY / GENERAL

City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) \_\_\_\_\_ (Year of Election)  SPECIAL / RUNOFF

## 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 AUGUST 5, 2020 Signature Bhajan Singh Dhalwal  
(month, day, year) (Candidate)