

Candidate Intention Statement

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CALIFORNIA
FORM

501

For Official Use Only

Check One: Initial Amendment (Explain) _____

2019 MAR 28 PM 3:04

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial)

Rains, Sandy

DAYTIME TELEPHONE NUMBER

CITY/AGENCY NUMBER (optional)

EMAIL (optional)

STREET ADDRESS

CITY

STATE

ZIP CODE

OFFICE SOUGHT (POSITION TITLE)

AGENCY NAME

DISTRICT NUMBER, if applicable.

NON-PARTISAN OFFICE

City Council Member

City of Laguna Niguel

PARTY PREFERENCE:

OFFICE JURISDICTION

State (Complete Part 2.)

PRIMARY / GENERAL

City

County

Multi-County:

(Name of Multi-County Jurisdiction)

2020

(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.

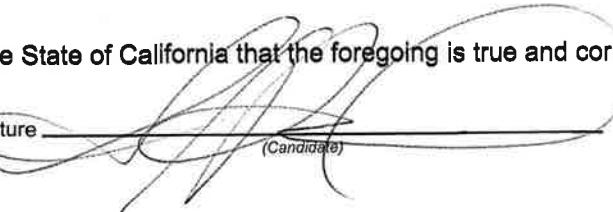
(Mark if applicable)

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 3/10/19 (month day, year)


Signature

(Candidate)