

Candidate Intention Statement

Date Stamp

CALIFORNIA
FORM

501

Check One: Initial Amendment (Explain) _____

2021 SEP 14 AM 9:37

For Official Use Only

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial)

von Waldburg, Jeff

STREET ADDRESS

[REDACTED]

DAYTIME TELEPHONE NUMBER

CITY

FAX NUMBER (optional)

EMAIL (optional)

[REDACTED]

[REDACTED]

STATE ZIP CODE

CA 92677

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.)

(Check one box, if applicable.)

 City County Multi-County:

(Name of Multi-County Jurisdiction)

2022

(Year of Election)

 PRIMARY / GENERAL 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

9/2/21
(month, day, year)

Signature

(Candidate)

FPPC Form 501 (August/2018)

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov