

Candidate Intention Statement

Type or Print in Ink.

CITY OF SAN LEANDRO

CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

OCT 17 2007

For Official Use Only

CITY CLERK'S OFFICE

Check One: [X] Initial [ ] Amendment (Explain) \_\_\_\_\_

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) ALMONTE, HERMY, B. DAYTIME TELEPHONE NUMBER ( 510 ) 430-0237 FAX NUMBER (optional) ( ) E-MAIL (optional) hermybalmonte@sbcglobal.net STREET ADDRESS 1199 Alder Creek Circle CITY San Leandro STATE CA ZIP CODE 94577 OFFICE SOUGHT (POSITION TITLE) CITY COUNCIL MEMBER AGENCY NAME CITY OF SAN LEANDRO DISTRICT NUMBER, if applicable. 6 [X] NON-PARTISAN PARTY: OFFICE JURISDICTION [ ] State [X] City [ ] County [ ] Multi-County: (Name of Multi-County Jurisdiction) 2008 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

Primary/general 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 OCTOBER 16, 2007 (month, day, year)

Signature [Handwritten Signature] (Candidate)