CANDIDATE INTENTION STATEMENT

Candidate Intention Statement

Type or Print in Ink.

CITY OF SAN LEANDRO
Date Stamp
SEP 24 2009
CITY CLERK'S OFFICE

CALIFORNIA FORM **501**

For Official Use Only

Check One: ☒ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE *(Last, First, Middle Initial)*	DAYTIME TELEPHONE NUMBER	FAX NUMBER *(optional)*	E-MAIL *(optional)*
Combs, Peggy H.	(510) 332-7803	( )	PeggyHCombs@aol.com

STREET ADDRESS	CITY	STATE	ZIP CODE
61 Georgia Way	San Leandro	CA	94577

OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, *if applicable.*	☒ NON-PARTISAN
City Council Member	City of San Leandro	5	PARTY:

OFFICE JURISDICTION

☐ State *(Complete Part 2.)*

☒ City ☐ County ☐ Multi-County: _____ *(Name of Jurisdiction)* 2010 *(Year of Election)*

2. State Candidate Expenditure Limit Statement:

(Candidates for statewide office are not required to complete Part 2 until 11/6/02. CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

_____ *(Year of Election)* ***Primary/general election*** _____ *(Year of Election)* ***Special/runoff 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.

Voluntary Expenditure Ceilings:

(Gov. Code Section 85400)

Office	Primary or Special	General or Special Run-off
(Effective 1/1/01)		
Assembly	$400,000	$700,000
Senate	$600,000	$900,000
(Effective 11/6/02)		
Board of Equalization	$1,000,000	$1,500,000
Governor	$6,000,000	$10,000,000
Lieutenant Governor, Attorney General, Insurance Commissioner, Controller, Secretary of State, Supt. of Public Instruction, Treasurer	$4,000,000	$6,000,000

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 09/23/2009 *(month, day, year)*, Signature _____ *(Candidate)*