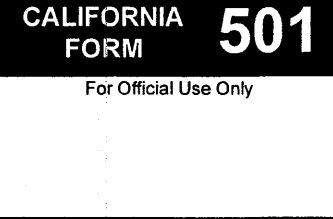
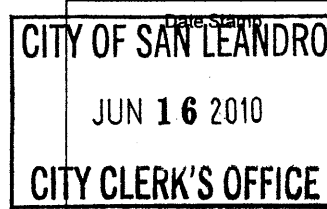


Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT



Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE: KA1, Burkhardt Edward (Ted) DAYTIME TELEPHONE NUMBER: (510) 382-1138 FAX NUMBER: () same E-MAIL: Tedkai@yahoo.com STREET ADDRESS: 183 1/2 Pakes Blvd CITY: City San Leandro STATE: CA ZIP CODE: 94577 OFFICE SOUGHT: City Council AGENCY NAME: City San Leandro DISTRICT NUMBER: 5 NON-PARTISAN: [] PARTY: green OFFICE JURISDICTION: [] State [x] City [] County [] Multi-County: _____ (Name of Multi-County Jurisdiction) 2010 (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.)

2010 Primary/general election NOV 9 Special/runoff election (Year of Election)

(Check one box)

[x] 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 06/16/2010 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 06/16/2010 (month, day, year)

Signature Burkhardt Edward Kai (Candidate)