

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

CITY OF SAN LEANDRO
Date Stamp
JUN 16 2010
CITY CLERK'S OFFICE

CALIFORNIA FORM 501

For Official Use Only

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

1. Candidate Information:

NAME OF CANDIDATE: KAI, 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: [X] City [] County [] Multi-County
Year of Election: 2010

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

(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)