Candidate Intention Statement

Type or Print in Ink.

CITY OF SAN LEANDRO (Date Stamp)
JUN 25 2012
CITY CLERK'S OFFICE

CANDIDATE INTENTION STATEMENT
CALIFORNIA FORM **501**
For Official Use Only

Check One: ☑ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial): Reed, Ursula C.
DAYTIME TELEPHONE NUMBER: ( )
FAX NUMBER (optional): ( )
E-MAIL (optional):
STREET ADDRESS: 14809 Oleander St.
CITY: San Leandro
STATE: CA
ZIP CODE: 94578
OFFICE SOUGHT (POSITION TITLE): Council member
AGENCY NAME: City of San Leandro
DISTRICT NUMBER, if applicable: Two
☑ NON-PARTISAN
PARTY:
OFFICE JURISDICTION
☐ State (Complete Part 2.)
☑ City ☐ County ☐ Multi-County: _____ (Name of Multi-County Jurisdiction)
2012 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

2012 (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:

O 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 6/25/12 (month, day, year), Signature _____ (Candidate)