Candidate Intention Statement

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

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)
Meister, Lauren D.

DAYTIME TELEPHONE NUMBER FAX NUMBER (optional) E-MAIL (optional)
(310) 659-3379 (310) 659-3380 lauren@meister4weho.com

STREET ADDRESS CITY STATE ZIP CODE
337 Westbourne Drive West Hollywood CA 90048

OFFICE SOUGHT (POSITION TITLE) AGENCY NAME DISTRICT NUMBER, if applicable [X] NON-PARTISAN PARTY:
City Council member City of West Hollywood n/a

OFFICE JURISDICTION
[ ] State (Complete Part 2.) [X] City [ ] County [ ] Multi-County: __________________________ (Name of Multi-County Jurisdiction) 2015

2. State Candidate Expenditure Limit Statement:

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

[ ] 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 runoff election.

[ ] 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 February 1, 2014
(month/day/year) Signature __________________________ (Candidate)