

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Check One: Initial Amendment (Explain) _____

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CALIFORNIA FORM 501
For Official Use Only

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Ralston, Matthew T DAYTIME TELEPHONE NUMBER _____ FAX NUMBER (optional) _____ E-MAIL (optional) VoteRalston@gmail.com
STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE West Hollywood CA 90046
OFFICE SOUGHT (POSITION TITLE) City Council member West Hollywood AGENCY NAME _____ DISTRICT NUMBER, if applicable _____ NON-PARTISAN
OFFICE JURISDICTION State (Complete Part 2.) City County Multi-County: _____ (Name of Multi-County Jurisdiction) _____ (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.)

2015 Primary/general election _____ Special/runoff election _____
(Year of Election) (Year of 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.

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 9/7/14
(month, day, year)

Signature _____
(Candidate)