

**Candidate Intention Statement**

Date Stamp <b>SAN BUENA VENTURA CITY CLERK</b>  18 MAY 10 8:12	<b>CALIFORNIA FORM 501</b>  For Official Use Only
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Check One:  Initial  Amendment (Explain) \_\_\_\_\_

**1. Candidate Information:**

NAME OF CANDIDATE (Last, First, Middle Initial) Forsythe, James, A. DAYTIME TELEPHONE NUMBER (805) 698-3990 FAX NUMBER (optional) ( ) E-MAIL (optional) Jamesa.Forsythe@gmail.com

STREET ADDRESS City Council, CITY Ventura STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

OFFICE SOUGHT (POSITION TITLE) Ventura County AGENCY NAME \_\_\_\_\_ DISTRICT NUMBER, if applicable. 1  NON-PARTISAN PARTY: Democrat

OFFICE JURISDICTION

State (Complete Part 2.)

City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) Year of Election 2018

**2. State Candidate Expenditure Limit Statement:**

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

2018 Primary/general election (Year of Election) Special/runoff 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 5/9/2018 (month, day, year)

Signature \_\_\_\_\_

