Candidate Intention Statement

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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)*: Petzold, Stephen C
DAYTIME TELEPHONE NUMBER: ( )
FAX NUMBER *(optional)*: ( )
E-MAIL *(optional)*: petz2@aol.com
STREET ADDRESS
CITY
STATE
ZIP CODE

OFFICE SOUGHT (POSITION TITLE): City Council Member
AGENCY NAME: Santa Clarita City
DISTRICT NUMBER, *if applicable.*: TBD
☒ NON-PARTISAN
PARTY:

OFFICE JURISDICTION
☐ State *(Complete Part 2.)*
☒ City ☐ County ☐ Multi-County: _____ *(Name of Multi-County Jurisdiction)*
2016 *(Year of Election)*

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

2016 *(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:
○ 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 9/24/2015 *(month, day, year)* Signature _____ *(Candidate)*