

Candidate Intention Statement

SAN BUENA VENTURA
 CITY CLERK
 '16 AUG 16 P2:07
 CALIFORNIA FORM 501
 For Official Use Only

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

| | | | |
|---|--------------------------|---------------------------------|---------------------------------------|
| NAME OF CANDIDATE (Last, First, Middle Initial) | DAYTIME TELEPHONE NUMBER | FAX NUMBER (optional) | E-MAIL (optional) |
| Graves, Michael A | (916) 459-8157 | () | Vote4Graves@gmail.com |
| STREET ADDRESS | CITY | STATE | ZIP CODE |
| [REDACTED] | Ventura | CA | 93001 |
| AGENCY NAME | | DISTRICT NUMBER, if applicable. | <input type="checkbox"/> NON-PARTISAN |
| City Councilmember | | PARTY: | |
| OFFICE JURISDICTION | | | |
| <input type="checkbox"/> State (Complete Part 2.) | | | |
| <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ (Name of Multi-County Jurisdiction) | | | |
| | | | 2016 (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.)

 (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 August 11, 2016 Signature [REDACTED]
 (month, day, year) (Candidate)