

Candidate Intention Statement

SAN BUENA VENTURA CITY CLERK Date Stamp

CALIFORNIA FORM 501

For Official Use Only

Check One: Initial Amendment (Explain) '16 APR 27 11:43

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) DAYTIME TELEPHONE NUMBER FAX NUMBER (optional) E-MAIL (optional)
Heitman Cheryl (905) 469-1704
STREET ADDRESS CITY STATE ZIP CODE
[Redacted] Ventura Ca. 93001
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME DISTRICT NUMBER, if applicable.
Council member Ventura, CA
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.)

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 4-27-16 Signature [Redacted]
(month, day, year) (Candidate)