

**Candidate Intention Statement**

Check One:  Initial  Amendment (Explain) \_\_\_\_\_

SAN BUENA VENTURA  
CITY CLERK

Date Stamp

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CALIFORNIA FORM 501

For Official Use Only

**1. Candidate Information:**

NAME OF CANDIDATE (Last, First, Middle Initial)

Brian Lee Rencher

DAYTIME TELEPHONE NUMBER

(805) 642-5872 ( )

FAX NUMBER (optional)

E-MAIL (optional)

voterencher@yahoo.com

STREET ADDRESS

CITY

STATE

ZIP CODE

Ventura, CA 93003

AGENCY NAME

San Buena Ventura City of San Buena Ventura

DISTRICT NUMBER, if applicable.

NON-PARTISAN

PARTY:

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  
(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 8-8-16  
(month, day, year)

Signature