

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp
City of Brentwood
NOV 30 2015
City Clerk

CALIFORNIA FORM 501
For Official Use Only

Check One: [X] Initial [] Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) FINK, JOHN D.
DAYTIME TELEPHONE NUMBER
FAX NUMBER (optional)
E-MAIL (optional)
STREET ADDRESS
CITY
STATE CA ZIP CODE 94513
OFFICE SOUGHT (POSITION TITLE) CITY COUNCIL
AGENCY NAME CITY OF BRENTWOOD
DISTRICT NUMBER, if applicable.
[] NON-PARTISAN
PARTY:
OFFICE JURISDICTION
[] State (Complete Part 2.)
[X] 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.)

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 11-27-15
(month, day, year)

Signature