Candidate Intention Statement	Type or Print in Ink.	Date Stamp	california 501
Check One: Initial			For Official Use Only
		CITY OF DANA POIN	r
1. Candidate Information:		2014 AUG 1 1 P 12: 3	R 1
NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER FAX NUM	MBER (optional) E-MAIL (on	otional)
Harold R. Kaufman STREET ADDRESS	CITY	TY CISTATE'S DEPARGODE	the residence of the second
STREET ADDRESS	CITT	A CONTINUE O DELAMINADE	76
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME	D	ISTRICT NUMBER, if applicable.	NON-PARTISAN
City Council		F	PARTY:
OFFICE JURISDICTION State (Complete Part 2.)	- d		
City County Multi-County:	(Name of Multi-County Jurisdiction)	(Year of Election)	
2. State Candidate Expenditure Limit Statemen (CalPERS candidates, judges, judicial candidates, and candidates for local offices an (Year of Election) (Year of Election)			
(Check one box) I accept the voluntary expenditure ceiling for the election st	ated above.		
☐ I do not accept the voluntary expenditure ceiling for the ele Amendment: ☐ I did not exceed the expenditure ceiling in the primary		and I accept the voluntary	expenditure ceiling for the
general or special run-off election.		,	<u> </u>
(Mark if applicable) On/, I contributed personal funds in exce	ss 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	Signature Ald Man (Caddidate)		

CANDIDATE INTENTION STATEMENT