

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp

CALIFORNIA
FORM

501

For Official Use Only

Check One: ☒ Initial ☐ Amendment (Explain) _____

CITY OF DANA POINT

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

Brough, Michelle R.

DAYTIME TELEPHONE NUMBER

2016 AUG 17 P 3:14

FAX NUMBER (optional)

E-MAIL (optional)

STREET ADDRESS

CITY

STATE

ZIP CODE

OFFICE SOUGHT (POSITION TITLE)

AGENCY NAME

DISTRICT NUMBER, if applicable.

☒ NON-PARTISAN

Dana Point City Council

PARTY:

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☒ 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.)

(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 16, 2016
(month, day, year)

Signature Michelle R. Brough
(Candidate)

FPPC Form 501 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)