

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp	<b>CALIFORNIA FORM 501</b>
RECEIVED	For Official Use Only

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

1. Candidate Information:

2008 MAY 30 P 3:37

NAME OF CANDIDATE (Last, First, Middle Initial) Scott Schoeffel	DAYTIME TELEPHONE NUMBER 949-481-3343	FAX NUMBER (optional)	E-MAIL (optional)
STREET ADDRESS 24843 Del Prado, #176	CITY Dana Point	STATE CA	ZIP CODE 92629
OFFICE SOUGHT (POSITION TITLE) City Council Member	AGENCY NAME City of Dana Point	DISTRICT NUMBER, if applicable. 0	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:
OFFICE JURISDICTION			
<input type="checkbox"/> State (Complete Part 2.)			
<input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: <u>City of Dana Point</u> <span style="float:right">2008</span> <small>(Name of Jurisdiction) (Year of Election)</small>			

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 May 29, 2008  
(month, day, year)

Signature J. Scott Schoeffel  
(Candidate)