

Candidate Intention Statement

Check One: Initial Amendment (Explain) _____

BY: *Julie C P*

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 Date Stamp
AUG 04 2020
 CALIFORNIA FORM **501**
 For Official Use Only

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) **Nate Kent C** DAYTIME TELEPHONE NUMBER _____ FAX NUMBER (optional) _____ EMAIL (optional) _____

STREET ADDRESS _____ CITY **Oakdale** STATE **CA** ZIP CODE **95361**

OFFICE SOUGHT (POSITION TITLE) **City Council** AGENCY NAME **City of Oakdale** DISTRICT NUMBER, if applicable: _____ PARTY PREFERENCE: NON-PARTISAN OFFICE PRIMARY / GENERAL SPECIAL / RUNOFF

OFFICE JURISDICTION State (Complete Part 2.) County Multi-County: _____ (Year of Election) **2020**

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, Judges, Judicial candidates, and candidates for local offices do not complete Part 2.)

(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 **AUG 4 2020** Signature _____
(month, day, year)