Candidate Intention Statement

Type or Print in Ink.

Date Stamp

CITY OF DANA POINT

2014 JUL 22 P 2:10

Check One: ☒ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

Chuck Rathbone

DAYTIME TELEPHONE NUMBER

FAX NUMBER (optional)

RECEIVED
CITY CLERK'S DEPA

( )

E-MAIL (optional)

STREET ADDRESS

CITY

STATE

ZIP CODE

OFFICE SOUGHT (POSITION TITLE)

City Council Member

AGENCY NAME

City of Dana Point

DISTRICT NUMBER, if applicable.

☒ NON-PARTISAN

OFFICE JURISDICTION

PARTY:

☐ State (Complete Part 2.)

☒ City ☐ County ☐ Multi-County: _____ City of Dana Point _____
(Name of Multi-County Jurisdiction)

2014
(Year of Election)

2. State Candidate Expenditure Limit Statement:

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

_____ **Primary/general election**
(Year of Election)

_____ **Special/runoff 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 __7/22/2014__
(month, day, year)

Signature _____
(Candidate)