

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp	CALIFORNIA FORM 501
CITY CLERK OFFICE	For Official Use Only
2014 JUL -1 P 5:23	

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Real Sebastian, Teresa DAYTIME TELEPHONE NUMBER () () FAX NUMBER () () **CITY OF MONTEREY PARK**

STREET ADDRESS 2168 S. Atlantic Blvd. No. 157 CITY Monterey Park STATE CA ZIP CODE 91754

OFFICE SOUGHT (POSITION TITLE) City Council AGENCY NAME City of Monterey Park DISTRICT NUMBER, if applicable. NON-PARTISAN PARTY:

OFFICE JURISDICTION State (Complete Part 2.) City County Multi-County: City of Monterey Park (Name of Jurisdiction) 2015 (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 07/01/14
(month, day, year)

Signature Teresa Real Sebastian
(Candidate)