

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Check One: ☒ Initial ☐ Amendment (Explain) _____

Date Stamp CITY CLERK MORENO VAL RECEIVED 14 AUG -7 PM 3:49	CA. FORM 501 For Official Use Only
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1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

Wetmore, Robin

DAYTIME TELEPHONE NUMBER

FAX NUMBER (optional)

E-MAIL (optional)

STREET ADDRESS

CITY

STATE

ZIP CODE

OFFICE SOUGHT (POSITION TITLE)

Council Candidate

AGENCY NAME

City of Moreno Valley

DISTRICT NUMBER, if applicable.

4

☐ NON-PARTISAN

PARTY: Democrat

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☒ City

☐ County

☐ Multi-County:

(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.)

(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

Executed on

Aug 7, 2014
(month, day, year)

Signature

[Redacted Signature]

FPPC Form 501 (April/2011)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)