

Candidate Intention Statement

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 OFFICE OF THE CITY CLERK

CALIFORNIA FORM 501
 For Official Use Only

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Roberson, Chad, A		DAYTIME TELEPHONE NUMBER () [REDACTED]	FAX NUMBER (optional) ()	E-MAIL (optional)
STREET ADDRESS [REDACTED]		CITY Palm Springs	STATE CA	ZIP CODE 92264
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME Member of the Palm Springs City Council		DISTRICT NUMBER, if applicable	<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: _____ <small>(Name of Multi-County Jurisdiction) (Year of Election)</small>				

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 of California that the foregoing is true and correct.

Executed on 03, 19, 2017 Signature 
(month, day, year) (Candidate)