

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp RECEIVED DEC 12 2013 CITY CLERK CITY OF CHICO	CALIFORNIA FORM 501 For Official Use Only
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Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Stone, Randall, C.	DAYTIME TELEPHONE NUMBER (530) 924-4298	FAX NUMBER (optional) ()	E-MAIL (optional) info@ElectStone.com
STREET ADDRESS [REDACTED]	CITY Chico	STATE CA	ZIP CODE 95926-3950
OFFICE SOUGHT (POSITION TITLE) Chico City Council	AGENCY NAME City of Chico	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:
OFFICE JURISDICTION <input checked="" type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: Chico	(Name of Jurisdiction)	2016	(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.)

_____/_____/_____ Primary/general 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.

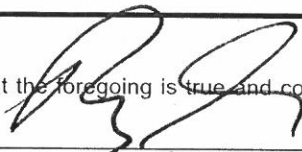
(Mark if applicable)

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 December 12, 2013
(month, day, year)

Signature  _____
(Candidate)