

Candidate Intention Statement

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CALIFORNIA FORM 501
 For Official Use Only

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Gabe Kearney DAYTIME TELEPHONE NUMBER _____ FAX NUMBER (optional) _____ E-MAIL (optional) _____
 STREET ADDRESS _____ CITY Petaluma STATE Ca ZIP CODE 94952
 OFFICE SOUGHT (POSITION TITLE) City Council AGENCY NAME City of Petaluma DISTRICT NUMBER, if applicable, _____ NON-PARTISAN
 OFFICE JURISDICTION _____ PARTY: _____
 State (Complete Part 2.) _____
 City County Multi-County: _____ (Name of Multi-County Jurisdiction) _____ 2016
 (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.)

2016 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 07/18/2016 Signature Gabe Kearney
 (month, day, year) (Candidate)