

RECEIVED

Candidate Intention Statement

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| AUG 12 2016 CITY CLERK | CALIFORNIA FORM 501 |
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Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) WOLPERT, BILL B. 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 State (Complete Part 2.) City County Multi-County: _____ (Name of Multi-County Jurisdiction) _____

Year of Election: 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 2016 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 8/9/2016 Signature Bill B. Wolpert

(month, day, year) (Candidate)