Candidate Intention Statement

Check One:  □ Initial  □ Amendment (Explain)  ____________________________________________

1. Candidate Information:
NAME OF CANDIDATE: Dario Castellanos
STREET ADDRESS: ____________________________________________
CITY: ____________________________________________
STATE: ____________________________________________
ZIP CODE: ____________________________________________

OFFICE SOUGHT (POSITION TITLE): West Covina City Council
AGENCY NAME: West Covina

OFFICE JURISDICTION:  □ State (Complete Part 2.)
☑ City  □ County  □ Multi-County: West Covina City
DISTRICT NUMBER, if applicable: 4
PARTY: ☐ NON-PARTISAN  ☑ CITY-WIDE

2. State Candidate Expenditure Limit Statement:
(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

☑ 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 runoff election.

☐ 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 May 3, 2018 (month, day, year)  Signature ____________________________________________

FPPC Form 501 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov