

# Candidate Intention Statement

Date Stamp  
**Received  
Watsonville  
City Clerk**  
SEP 20 '17 PM 5:08

**CALIFORNIA FORM 501**  
For Official Use Only

**Check One:**  Initial  Amendment (Explain) \_\_\_\_\_  
\_\_\_\_\_

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)		DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	E-MAIL (optional)
Sarmiento, Jenny T.		( 831 ) [REDACTED]	( )	[REDACTED]
STREET ADDRESS		CITY	STATE	ZIP CODE
[REDACTED]		Watsonville	CA	95076
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	<input type="checkbox"/> NON-PARTISAN	
Council Member	City of Watsonville	Four	PARTY: Democrat	
OFFICE JURISDICTION				
<input type="checkbox"/> State (Complete Part 2.)				
<input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ (Name of Multi-County Jurisdiction)				
2018 (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.)

2018 Primary/general election                 Special/runoff election  
(Year of 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 Sept 20, 2017  
(month, day, year)

Signature [REDACTED]  
(Candidate)