

Candidate Intention Statement

Received
 Watsonville
 City Clerk
 Date Stamp
 FEB 13 10:37 AM '18

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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) **Lowell Hurst** DAYTIME TELEPHONE NUMBER **(831)-** FAX NUMBER (optional) E-MAIL (optional)

STREET ADDRESS _____ CITY **Watsonville** STATE **CA** ZIP CODE **95076**

OFFICE SOUGHT (POSITION TITLE) **Watsonville City Council** AGENCY NAME _____ DISTRICT NUMBER, if applicable. **3** NON-PARTISAN

OFFICE JURISDICTION: State (Complete Part 2.) City County 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.)

_____ 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 information provided on this form is true and correct.

Executed on **2/13/18** _____ Sig _____
 (month, day, year)

