

Candidate Intention Statement

Date Stamp	CALIFORNIA FORM 501
CITY OF GOLETA CITY CLERK'S OFFICE 2016 MAY 27 AM 10:19	
For Official Use Only	

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) RICHARDS, KYLE A.		DAYTIME TELEPHONE NUMBER (805) 451-8219	FAX NUMBER (optional) ()	E-MAIL (optional)
STREET ADDRESS 37 DEARBORN PL #84		CITY GOLETA	STATE CA	ZIP CODE 93117
OFFICE SOUGHT (POSITION TITLE) CITY COUNCIL	AGENCY NAME CITY OF GOLETA	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:	
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)				
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.)

(Year of Election) **Primary/general election** _____
(Year of Election) **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 MAY 27, 2016 Signature Kyle A. Richards
(month, day, year) (Candidate)