

Candidate Intention Statement

Type or Print in Ink.

Date Stamp

CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Check One: Initial Amendment (Explain) _____

CITY OF GOLETA
CITY CLERK'S OFFICE

2010 AUG 2 PM 2 33

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Perotte Paula A. DAYTIME TELEPHONE NUMBER (805) 685-8535 FAX NUMBER (optional) () E-MAIL (optional) paulaperotte@cox.net

STREET ADDRESS 7847 Rio Vista Drive CITY Goleta STATE Ca. ZIP CODE 93117

OFFICE SOUGHT (POSITION TITLE) City Council AGENCY NAME City of Goleta DISTRICT NUMBER, if applicable. NON-PARTISAN
PARTY: Democrat

OFFICE JURISDICTION
 State (Complete Part 2.)
 City County Multi-County: _____ (Name of Multi-County Jurisdiction)
2010 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

____ Primary/general election (Year of Election) _____ Special/runoff 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 8-2-2010
(month, day, year)

Signature Paula Perotte
(Candidate)