

Candidate Intention Statement

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CANDIDATE INTENTION STATEMENT

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Check One: [X] Initial [] Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Duran, John DAYTIME TELEPHONE NUMBER (562) 983-0815 FAX NUMBER () E-MAIL (optional) STREET ADDRESS 9000 Sunset Blvd., #710 CITY West Hollywood STATE CA ZIP CODE 90069 OFFICE SOUGHT (POSITION TITLE) City Council Member AGENCY NAME City of West Hollywood DISTRICT NUMBER, if applicable. [X] NON-PARTISAN PARTY: OFFICE JURISDICTION [] State (Complete Part 2.) [X] City [] County [] Multi-County: (Name of Multi County Jurisdiction) 2017 (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 (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 04/19/2016 (month, day, year)

Signature (Candidate)