

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Check One: Initial Amendment (Explain)

RECEIVED CITY OF WEST HOLLYWOOD 10 SEP 20 PM 1:58 OFFICE OF THE CITY CLERK

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) CRW, CHILI SCOT DAYTIME TELEPHONE NUMBER (310) 9489447 FAX NUMBER () E-MAIL (optional) STREET ADDRESS 1140 N CLARK # 311 CITY WEST HOLLYWOOD STATE CA ZIP CODE 90069 OFFICE SOUGHT (POSITION TITLE) CITY COUNCIL WEST HOLLYWOOD AGENCY NAME DISTRICT NUMBER, if applicable. NON-PARTISAN OFFICE JURISDICTION State (Complete Part 2.) City County Multi-County: (Name of Multi-County Jurisdiction) 2011 (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 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 9/13/10 (month, day, year)

Signature [Handwritten Signature] (Candidate)