

# Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

**CALIFORNIA FORM 501**

For Official Use Only

Date Stamp  
**RECEIVED**  
 CITY OF WEST HOLLYWOOD  
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Check One:  Initial  Amendment (Explain) \_\_\_\_\_

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) GONZAGA, MARK R. DAYTIME TELEPHONE NUMBER 323 848 - 9787 FAX NUMBER (optional) \_\_\_\_\_ E-MAIL (optional) \_\_\_\_\_

STREET ADDRESS 1037 N. Genesee Ave. #4 West Hollywood, CITY CA STATE CA ZIP CODE 90046

OFFICE SOUGHT (POSITION TITLE) WEST HOLLYWOOD City Council Member AGENCY NAME \_\_\_\_\_ DISTRICT NUMBER, if applicable. \_\_\_\_\_  NON-PARTISAN

OFFICE JURISDICTION  State (Complete Part 2)  City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) PARTY: \_\_\_\_\_

\_\_\_\_\_ (Year of Election) 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.)

\_\_\_\_\_  
 (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 12-21-2010  
 (month, day, year)

Signature [Handwritten Signature]  
 (Candidate)