

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Check One: Initial Amendment (Explain)

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14 AUG -7 PM 3:58

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) MELONE, AL
DAYTIME TELEPHONE NUMBER (714) 751-4580
STREET ADDRESS 2973 Harbor Blvd. #200 COSTA MESA, CA 92626
CITY COSTA MESA STATE CA ZIP CODE 92626
E-MAIL (optional) bigal2040@gmail.com
FAX NUMBER (optional) (714) 435-1792
AGENCY NAME CITY COUNCIL
OFFICE SOUGHT (POSITION TITLE) CITY COUNCIL
OFFICE JURISDICTION State (Complete Part 2.) City County Multi-County: COSTA MESA (Name of Multi-County Jurisdiction)
DISTRICT NUMBER, if applicable. NON-PARTISAN PARTY: 2014 (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 Special/runoff election
(Year of 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 8-7-14 (month, day, year) Signature _____ (Candidate)