Candidate Intention Statement	Type or Print in Ink.	CIT	Y CLE CALIFORNIA 501
Check One: X Initial Amendment (Explain)		— 15 JU	For Official Use Only
			Papri
1. Candidate Information:		BY_	
NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	E-IVIAIL V(optional)
Lee Ramos	(949) 439-9200	()	lee4costamesa@gmail.com
STREET ADDRESS	CITY	STATE	ZIP CODE
2001 Aliso Ave	Costa Mesa	CA	92627
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME		DISTRICT NUMBE	R, if applicable. NON-PARTISAN
City Council Member			PARTY:
OFFICE JURISDICTION State (Complete Part 2.)			•
			01.6
☐ City ☐ County ☐ Multi-County:	(Name of Multi County Jurisdiction)		016 of Election)
(Check one box) I accept the voluntary expenditure ceiling for the election state of the election of the election state of the election of the expenditure ceiling in the primar the general or special run-off election.	ction stated above.	and I acce	ept the voluntary expenditure ceiling for
	Who the same of th		
(Mark if applicable)			
On/, I contributed personal funds in excess	ss of the expenditure ceiling for the	election stated above	
3. Verification:			
I certify under penalty of perjury under the laws of the State of	f California th		
Executed on	Signature(Candi	date)	

FPPC Form 501 (April/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)