

**Candidate Intention Statement**

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 via email  
 24 MAY 31 AM 10:23  
 CITY OF COSTA MESA  
 BY [Redacted]

**CALIFORNIA FORM 501**  
 For Official Use Only

Check One:  Initial  Amendment (Explain) \_\_\_\_\_

**1. Candidate Information:**

NAME OF CANDIDATE (Last, First Middle Initial) Peters, James	DAYTIME TELEPHONE NUMBER ( 949 ) 285-1255	FAX NUMBER (optional) ( )	EMAIL (optional) james@petersformayor2024.com
STREET ADDRESS [Redacted]	CITY Costa Mesa	STATE CA	ZIP CODE 92626
OFFICE SOUGHT (POSITION TITLE) Mayor	AGENCY NAME City of Costa Mesa	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ (Name of Multi-County Jurisdiction)			PARTY PREFERENCE: (Check one box, if applicable.) <input checked="" type="checkbox"/> PRIMARY / GENERAL <input type="checkbox"/> SPECIAL / RUNOFF
2024 (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.)*

*(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 05/23/2024  
 (month, day, year)

Signature [Redacted]  
 (Candidate)