

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Check One:

Initial

Amendment (Explain) CHANGE OF HOME ADDRESS

Date Stamp

RWD
5/5/14 @
11:27am lib

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

ENGLEBRECHT, RYAN

DAYTIME TELEPHONE NUMBER

(949) 235-6155

FAX NUMBER (optional)

(714) 492-7103

E-MAIL (optional)

STREET ADDRESS

CITY

STATE

ZIP CODE

OFFICE COUNTY (POSITION TITLE)

CITY COUNCIL

AGENCY NAME

DISTRICT NUMBER, if applicable.

NON-PARTISAN

OFFICE JURISDICTION

PARTY: REPUBLICAN

State (Complete Part 2.)

City

County

Multi-County:

NEWPORT BEACH

(Name of Multi-County Jurisdiction)

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

(Year of 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

5-2-14

(month, day, year)

Signature

[Handwritten Signature]

(Candidate)