Candidate Intention Statement	T		CANDIDATE INTENTION STATEMENT
Outside interition Otal Cincin	Type or Print in Ink.	- Date Stamp	FORM 501
Check One: ☐ Initial ☐ Amendment (E	Address Change	2014 JUL 3 F PM 2: 37	For Official Use Only
		orange or	
		OFFICE OF	
1. Candidate Information:		OTY OF NEWFORT BEACH	
NAME OF CANDIDATE (Last, First, Middle Initial)	· DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional) E-MAIL	(optional)
Scott Peotter	(949) 250-7118	(949) 250-7116 scott@	peotter.com
STREET ADDRESS	CITY	STATE ZIP COL	DE
OFFICE SOUGHT (POSITION TITLE) AGENCY	NIAME		
			NON-PARTISAN
City Council City of OFFICE JURISDICTION	Newport Beach	6	PARTY:
State (Complete Part 2.)			
☑ City ☐ County ☐ Multi-County:	(Name of Multi-County Jurisdiction)	2014 (Year of Election)	
	(realize of Mulio-Couliny Julisticition)	(real of Election)	
(Check one box) accept the voluntary expenditure ceiling for the	Special/runoff election		
		-	
☐ I do not accept the voluntary expenditure ceiling Amendment:			
O I did not exceed the expenditure ceiling in the general or special run-off election.	ne primary or special election held on:	/ and I accept the volun	tary expenditure celling for
(Mark if applicable)			
*	s in excess of the expenditure ceiling for	the election stated above.	
3. Verification:			
I certify under penalty of perjury under the laws of	of the State of California that the foreg	oing is true and correct.	
Executed on 7.3\ 4 (month, day, year)	DN:c 'emai	ally signed by Scott Peotter n=Scott Peotter; o, ou, l=scott@Peotter.com, c=US 2014.07.30 23:27:36 -07'00' FPPC Toll-Free He	FPPC Form 501 (April/2011) Ipline: 866/ASK-FPPC (866/275-3772)