

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Check One: [X] Initial [] Amendment (Explain)

RECEIVED Date Stamp 2006 SEP -6 PM 2:59 OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH FAX NUMBER (optional)

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

DAYTIME TELEPHONE NUMBER

E-MAIL (optional)

Edward D Selich

(949) 723-6383

STREET ADDRESS

CITY

STATE

ZIP CODE

OFFICE SOUGHT (POSITION TITLE)

AGENCY NAME

DISTRICT NUMBER, if applicable.

[X] NON-PARTISAN

Council Member 5th District

City of Newport Beach

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PARTY:

OFFICE JURISDICTION

[] State (Complete Part 2.)

[X] City [] County [] Multi-County:

(Name of Multi-County Jurisdiction)

2005

(Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to 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 September 6, 2006 (month, day, year)

Signature

[Handwritten Signature]

(Candidate)