

Candidate Intention Statement

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CANDIDATE INTENTION STATEMENT

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CALIFORNIA FORM 501
For Official Use Only

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

OFFICE OF THE CITY CLERK
CITY OF NEWPORT BEACH

NAME OF CANDIDATE (Last, First, Middle Initial) GARDNER, NANCY L
DAYTIME TELEPHONE NUMBER (949) 673-0706
FAX NUMBER (optional) ()
E-MAIL (optional) gardnerncy@aol.com
STREET ADDRESS 323 JASMINE
CITY CORONA DEL MAR
STATE CA ZIP CODE 92625
OFFICE SOUGHT (POSITION TITLE) CITY COUNCIL
AGENCY NAME CITY OF NEWPORT BEACH
DISTRICT NUMBER, if applicable.
 NON-PARTISAN
PARTY:
OFFICE JURISDICTION
 State (Complete Part 2.)
 City County Multi-County: _____
(Name of Multi-County Jurisdiction)
2006
(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 5/3/06 (month, day, year)

Signature [Handwritten Signature] (Candidate)