

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp

CALIFORNIA FORM 501

For Official Use Only

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

194 MAR 03 11:57

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Rosansky, Steven J
DAYTIME TELEPHONE NUMBER ( 949 ) 631-9975
FAX NUMBER (optional) ( 949 ) 631-9973
E-MAIL (optional) parahdigm@aol.com
STREET ADDRESS 210 62nd Street
CITY Newport Beach
STATE CA
ZIP CODE 92663
OFFICE SOUGHT (POSITION TITLE) City Councilman
AGENCY NAME City of Newport Beach
DISTRICT NUMBER, if applicable. 2
NON-PARTISAN [X]
OFFICE JURISDICTION [X] City [ ] County [ ] Multi-County: Newport Beach
Year of Election 2004

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 Special/runoff 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 February 26, 2004 (month, day, year)

Signature [Handwritten Signature] (Candidate)