Candidate Intention Statement

Check One:  ☒ Initial  □ Amendment (Explain) __________________________

1. Candidate Information:

   NAME OF CANDIDATE (Last, First, Middle Initial)  STAPLETON, JOSEPH, M
   DAYTIME TELEPHONE NUMBER  (949) 922-6304
   FAX NUMBER (optional) _____________________________________________
   E-MAIL (optional) joems55@gmail.com
   STREET ADDRESS ___________________________________________________
   CITY _____________________________________________________________
   STATE ___________________________________________________________
   ZIP CODE _________________________________________________________
   OFFICE SOUGHT (POSITION TITLE) __________________________________
   AGENCY NAME _____________________________________________________
   DISTRICT NUMBER, if applicable, 1
   NON-PARTISAN PARTY: ☑
   OFFICE JURISDICTION
   ☑ City  ☐ County  ☐ Multi-County: ____________________________
   (Name of Multi-County Jurisdiction) ____________________________
   (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.
   ☐ I exceeded the expenditure ceiling in the primary or special election held on: ______/____/____

   (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 July 3, 2013  Signature ____________________________
   (month, day, year) (Candidate)