

Candidate Intention Statement

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CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

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

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Park, Andrew, Y
DAYTIME TELEPHONE NUMBER (510)
FAX NUMBER (optional)
E-MAIL (optional) @gmail.com
STREET ADDRESS
CITY Oakland STATE CA ZIP CODE 94606
OFFICE SOUGHT (POSITION TITLE) City Council AGENCY NAME City of Oakland DISTRICT NUMBER, if applicable 2 [X] NON-PARTISAN PARTY:
OFFICE JURISDICTION [] State (Complete Part 2.) [X] City [] County [] Multi-County: (Name of Multi-County Jurisdiction) 2014 (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 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 2/11/14 Signature
(month, day, year) (Candidate)