Candidate Intention Statement

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CALIFORNIA FORM **501**

For Official Use Only

Check One: ☒ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial): BRIETIGAM III, GEORGE, S.

DAYTIME TELEPHONE NUMBER: [redacted]

FAX NUMBER (optional): (–) – N/A

E-MAIL (optional): GBRIETIGAM@SOCAL.RR.COM

STREET ADDRESS: [redacted] GARDEN GROVE, CA. 92845

CITY / STATE / ZIP CODE

OFFICE SOUGHT (POSITION TITLE): GARDEN GROVE COUNCIL MEMBER, DISTRICT NO. 1

AGENCY NAME

DISTRICT NUMBER, if applicable: 1

☒ NON-PARTISAN

PARTY:

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☒ City ☐ County ☐ Multi-County: CITY OF GARDEN GROVE (Name of Multi-County Jurisdiction)

2018 (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.)

_____ (Year of Election) ***Primary/general election*** _____ (Year of 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 8/8/18 (month, day, year), Signature George S. Brietigam III (Candidate)