

# Candidate Intention Statement

Date Stamp <b>TORRANCE</b> 2018 FEB -5 PM 2:50 CITY CLERK'S OFFICE	<b>CALIFORNIA FORM 501</b> For Official Use Only
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Check One:  Initial  Amendment (Explain) \_\_\_\_\_

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) <b>Gow, Jimmy</b>	DAYTIME TELEPHONE NUMBER ( ) ( ) ( ) ( ) ( ) ( )	FAX NUMBER (optional) ( ) ( ) ( ) ( ) ( ) ( )	E-MAIL (optional) [REDACTED]
STREET ADDRESS [REDACTED]		CITY <b>Torrance, CA</b>	STATE ZIP CODE <b>90504-9998</b>
OFFICE SOUGHT (POSITION TITLE) <b>Councilmember, City of Torrance</b>	AGENCY NAME	DISTRICT NUMBER, if applicable	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> 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.)

\_\_\_\_\_  
(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 January 31, 2018  
(month, day, year)

Signature: [REDACTED]