

# Candidate Intention Statement



Check One:  Initial  Amendment (Explain) \_\_\_\_\_

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) <b>TIM SCHAEFER</b>	DAYTIME TELEPHONE NUMBER [REDACTED]	FAX NUMBER (optional) [REDACTED]	EMAIL (optional) <b>tim@electtim.org</b>
STREET ADDRESS [REDACTED]	CITY <b>CITRUS HEIGHTS</b>	STATE <b>CA</b>	ZIP CODE <b>95621</b>
OFFICE SOUGHT (POSITION TITLE) <b>COUNCILMEMBER</b>	AGENCY NAME <b>CITY OF CITRUS HEIGHTS</b>	DISTRICT NUMBER, if applicable. <b>3</b>	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE PARTY PREFERENCE: (Check one box, if applicable.) <input checked="" type="checkbox"/> PRIMARY / GENERAL <input type="checkbox"/> SPECIAL / RUNOFF
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)		<b>2020</b> (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.)

(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

7/31/2020  
(month, day, year)

Signature

[REDACTED SIGNATURE]

(Candidate)