

Candidate Intention Statement

Date Stamp <b>RECEIVED</b>  <b>FEB 05 2021</b>	<b>CALIFORNIA FORM 501</b>  For Official Use Only
<b>TOWN OF WINDSOR</b>	

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

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) <u>Reynosa, Rosa</u>	DAYTIME TELEPHONE NUMBER [REDACTED]	FAX NUMBER (optional) [REDACTED]	EMAIL (optional) [REDACTED]
STREET ADDRESS [REDACTED]	CITY <u>Windsor</u>	STATE <u>CA</u>	ZIP CODE <u>95492</u>
OFFICE SOUGHT (POSITION TITLE) <u>Town Council Member</u>	AGENCY NAME <u>Town of Windsor</u>	DISTRICT NUMBER, if applicable	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County:	<u>Town of Windsor RR</u> (Name of Multi-County Jurisdiction)	<u>2021</u> (Year of Election)	PARTY PREFERENCE: (Check one box, if applicable.) <input type="checkbox"/> PRIMARY / GENERAL <input checked="" type="checkbox"/> SPECIAL / RUNOFF

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 02, 05, 2021 (month, day, year) Signature [REDACTED] (Candidate)