

Candidate Intention Statement

RECEIVED CITY CLERK 16 AUG -4 PM 5:39 CITY OF CARSON	CALIFORNIA FORM 501 For Official Use Only
---	---

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) <u>MURDOCK, BRANDI S.</u>	DAYTIME TELEPHONE NUMBER <u>(310) 567-6134</u>	FAX NUMBER (optional) <u>(310) 997-3500</u>	E-MAIL (optional) <u>MYA.COMMISSIONER@MURDOCK.COM</u>
STREET ADDRESS <u>20029 ALVO AVE.</u>	CITY <u>CARSON</u>	STATE <u>CA.</u>	ZIP CODE <u>90746</u>
OFFICE SOUGHT (POSITION TITLE) <u>CITY COUNCILMEMBER</u>	AGENCY NAME <u>CITY OF CARSON</u>	DISTRICT NUMBER, if applicable.	<input type="checkbox"/> NON-PARTISAN PARTY: <u>DEMOCRAT</u>
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 August 4, 2016
(month, day, year)

Signature [Signature]
(Candidate)