

# Candidate Intention Statement

Date Stamp  RECEIVED  FEB 12 2021  KINGS COUNTY ELECTIONS	CALIFORNIA FORM <b>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) Valle, Richard		DAYTIME TELEPHONE NUMBER ( 559 ) 992-8799	FAX NUMBER (optional) ( )	EMAIL (optional)
STREET ADDRESS [REDACTED]		CITY [REDACTED]	STATE [REDACTED]	ZIP CODE [REDACTED]
OFFICE SOUGHT (POSITION TITLE) County Supervisor, Kings County	AGENCY NAME [REDACTED]	DISTRICT NUMBER, if applicable 2	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE	
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input type="checkbox"/> City <input checked="" type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ <small>(Name of Multi-County Jurisdiction)</small>		PARTY PREFERENCE <small>(Check one box, if applicable.)</small> <input checked="" type="checkbox"/> PRIMARY / GENERAL <input type="checkbox"/> SPECIAL / RUNOFF		
		2824 <small>(Year of Election)</small>		

## 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 01/15/2021  
(Month, Day, Year)

Signature [Handwritten Signature]  
(Candidate)