Candidate Intention Statement	Date Stamp CALIFORNIA 501
Check One:	For Official Use Only
1. Candidate Information:	TO A COLUMN TO THE COLUMN TO T
NAME OF CANDIDATE (Last, First Middle Initial) ANDRE HENCLEYON, KYPE M STREET ADDRESS CITY OFFICE SOUGHT (POSITION TITLE) AGENCY NAME	() STATE ZIP CODE
Kings River Hardwick School Bonge	PARTY PREFERENCE:
OFFICE JURISDICTION	(Check one box, if applicable.)
State (Complete Part 2.) City County Multi-County: (Name of Multi-County India)	20:22 PRIMARY/GENERAL
County Multi-County: (Name of Multi-County Juris	sdiction) (Year of Election) SPECIAL / RUNOFF
(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 for the general or special run-off election.	
(Markett applicable)	
(Mark if applicable)	
(Mark if applicable) On, contributed personal funds in excess of the expend	diture ceiling for the election stated above.
	diture ceiling for the election stated above.