Candidate Intention Statement	RECENTED	FORM 501
Check One: Amendment (Explain)	JUL 1 8:2022	For Official Use Only
KINGS COUNTY ELECTIONS		s
1. Candidate Information:	, , , , , , , , , , , , , , , , , , ,	
	MBER (optional) EMAIL (optional) 582-8/06 /eur	otional) 18 = n@griswoldles.llecom
LEMUGHE		245
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME DISTRICT	NUMBER, if applicable: NON-	
TONSTEE WEST HILLS COMMUNITY CULTER DISTAICE 559-	934-2102 PARTYP	REFERENCE:
OFFICE JURISDICTION Kings - France - Medica - Sou Beauto - Munitaria Cas.	utres (Check one box, if applicable.) PRIMARY / GENERAL
City County Multi-County: WEST HILLS COMMUNITY COLLEGE PUTMI	(7 2022 (Year of Election)	SPECIAL / RUNOFF
(Check one box) Traccept 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 volunt	ary expenditure ceiling for
(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 tru	e and correct.	
Executed on 7, 18, 22 Signature (month, day, year)	FPPC A	FPPC Form 501 (August/2018) dvice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov