Candidate In	ntention St	atement		received ^o		CALIFORNIA 501
Check One:	[☑Initial	Amendment (Explain)			AUG 11 2022	For Official Use Only
				KING	S COUNTY ELECTION	g
1. Candidate Ir	nformation:					1 (11)
NAME OF CANDIDATE LEHN STREET ADDRESS	(Last, First Middle Initia	S.	DAYTIME TELEPHONE NUMBER	FAX NUMI	BER (optional) EMAIL (o	optional) ehn@yahao.com
OFFICE SOUGHT (POS	SITION TITLE)	AGENCY	HANFORD	DISTRICT	CA 937 IUMBER, if applicable.	
OFFICE JURISDICTION State (Complete	-	COLLEGE DE	THE SEQUOIAS	5	PARTY	PREFERENCE: (Check one box, if applicable.) PRIMARY / GENERAL
City C	county Mul	lti-County:	(Name of Multi-County Jurisdiction)		(Year of Election)	SPECIAL / RUNOFF
□I do not acc Amendme ○ I did n	ept the voluntar ent: ot exceed the ex		ection stated above. or the election stated above. e primary or special election held on:		_ and I accept the volun	tary expenditure ceiling for
(Mark if applicable)						
☐ On <i>_</i> _	, I co	ntributed personal fund	ds in excess of the expenditure ceiling for	r the election s	tated above.	
3. Verification:						
		2 7 7 7	of the State of California that the fore	going is true	and correct.	
Executed on	(modili), day,	-, 2022 s	Signature (Candidate)			FPPC Form 501 (August/2