

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

RECEIVED	Date Stamp NOV 02 2012	CALIFORNIA FORM 501
		For Official Use Only
CITY CLERK'S OFFICE CITY OF SUNNYVALE		

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	E-MAIL (optional)
Griffith, James R.	(408)	()	
STREET ADDRESS	CITY	STATE	ZIP CODE
	Sunnyvale	CA	94089
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN
Councilmember, Seat #3	City of Sunnyvale		PARTY:
OFFICE JURISDICTION			2013
<input type="checkbox"/> State (Complete Part 2.)			(Year of Election)
<input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____	(Name of Multi-County Jurisdiction)		

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.

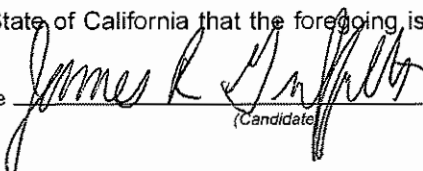
(Mark if applicable)

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 November 1, 2012
(month, day, year)

Signature 
(Candidate)