

Candidate Intention Statement

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Check One:  Initial  Amendment (Explain) \_\_\_\_\_

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Zavala, Jorge DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) \_\_\_\_\_ EMAIL (optional) \_\_\_\_\_

STREET ADDRESS [REDACTED] CITY Moreno Valley STATE CA ZIP CODE 92553

OFFICE SOUGHT (POSITION TITLE) Council member AGENCY NAME City of Moreno Valley DISTRICT NUMBER, if applicable. 3  NON-PARTISAN OFFICE

OFFICE JURISDICTION:  State (Complete Part 2.)  City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction)

PARTY PREFERENCE: (Check one box, if applicable.)  PRIMARY / GENERAL  SPECIAL / RUNOFF

(Year of Election) 2020

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 1/1 and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Check one box)

On 1/1 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 05-19-2020 Signature [REDACTED]

(month, day, year)