

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Check One: [X] Initial [] Amendment (Explain)

Date Stamp RECEIVED 2015 AUG 10 AM 11:46 CITY OF TORRANCE CLERK'S OFFICE

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Sheikh, Asam DAYTIME TELEPHONE NUMBER CITY Torrance STATE CA ZIP CODE 90504 OFFICE SOUGHT (POSITION TITLE) City Council AGENCY NAME City of Torrance DISTRICT NUMBER, if applicable. N/A [X] NON-PARTISAN OFFICE JURISDICTION [X] City [] County [] Multi-County: 2016 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

Primary/general 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: [] 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 08/06/2015 Signature