Candidate Intention Statement	Date Stamp	CALIFORNIA 501
Check One: Amendment (Explain)	TORRAN	
	2017 APR 20 A	M II: 39
1. Candidate Information:	WY CLEARS	OFFICE
STREET ADDRESS CITY	STATE ZIP	CODE
	STRICT NUMBER, if applica	
OFFICE JURISDICTION State (Complete Parl 2.) City County Multi-County: (Name of Multi-County Jurisdiction)	2018 (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.) (Year of 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: O I did not exceed the expenditure ceiling in the primary or special election held on:	and I accept the v	oluntary 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 true	and correct.	
Executed on APRIL 18, 7017 Signature (Candidate)	F	FPPC Form 501 (Jan/2016) PPC Advice: advice@fppc.ca.gov (866/275-3772)

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