Candidate Intention Sta	atement			Date Stamp	CALIFORNIA 501
Check One: Initial	☐Amendment (Explain	in)	cii/	RECEIVED OF SEE VALLEY	For Official Use Only
			2019 U	JL 16 PM 4: 24	
1. Candidate Information:				E UP CITY CLERK	
NAME OF CANDIDATE (Last, First, Middle Ini	itial)	DAYTIME TEI EPHONE NI IMRER	FAX NUMBE	ER (optional) E-MAIL	ontional)
Luevanos, Rustreet Address	146	Simi Valler	<u> </u>	STATE ZIP COD	5063
OFFICE SOUGHT (POSITION TITLE) OFFICE JURISDICTION	AGENCY NAM	of SimiValley	DIST	7	NON-PARTISAN PARTY:
☐ State (Complete Part 2.) ☐ City ☐ County ☐ Mu	ulti-County:	(Name of Mutti-County Jurisdiction)		2023 (Year of Election)	
(Check one box) accept the voluntary experience.	(rear or Ex	·			
☐ I do not accept the volunta Amendment:	ary expenditure ceiling for the	ne election stated above.			
O I did not exceed the e the general or special		imary or special election held on:		and I accept the volunt	ary expenditure ceiling for
(Mark if applicable)		-			
☐ On/, I con	ntributed personal funds in	excess of the expenditure ceiling for	the election sta	ated above.	
3. Verification:					
I certify under penalty of pe	rjury under the laws of th	e State of California that the foreg	oing is true a	nd correct.	
Executed on July 16	2019 , Signa	ature Ruth Kull (Candidate)	rams	-	FPPC Form 501 (J

FPPC Form 501 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov