Candidate in	itention S	tatement				Releaning City of Mission		CALIFORNIA FORM	501
Check One:	Initial	Amendment (Explain)				JUN - 7 2022		For Official Use Only	
						City Clerk			
1. Candidate In	formation:								
NAME OF CANDIDATE	(Last, First Middle In	itial)		DAYTIME TELEPHONE NUME	BER FAX	( NUMBER (optional)	EMAIL (	optional)	
Vasquez, Cynthi	ia					· v :::::::::::::::::::::::::::::::::::		,	
STREET ADDRESS				CITY		STATE	ZIP COD	E	
OFFICE SOUGHT (POS	ITION TITLE)		AGENCY NAME		DIST	RICT NUMBER, if applicat	ole. X NON	-PARTISAN OFFICE	
City Council Member City of Mission				n Viejo		3	10000	PREFERENCE:	
OFFICE JURISDICTION								(Check one box, if applica	able.)
State (Complete	Part 2.)						1	X PRIMARY / GENERA	.L
X City ☐ Co	ounty 🔲 M	ulti-County:		(Name of Multi-County Jurisdiction	1)	202 (Year of Ele		SPECIAL / RUNOFF	
Amendme	ept the volunta	ary expenditur	eiling in the primar	tated above. ection stated above. y or special election held on	: <u>/</u>	/ and I accept	the volunt	tary expenditure ceil	ling for
(Mark if applicable)  On	,10	contributed pe	rsonal funds in exc	cess of the expenditure ceiling	ng for the elec	tion stated above.			
3. Verification:									
I certify under	penalty of pe	erjury under	the laws of the S	state of California that the	foregoing is	true and correct.			
Executed on	05/25/202 (month, day		Signature	. Cythu Voice (Can prod	leg		FPPC A	FPPC For advice: advice@fppc.c	rm 501 (August/201 ca.gov (866/275-377

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