Candidate Intention Statement					Date Stamp		CALIFORNIA 501
Check One:	Initial	☐Amendment (Explain)		Cit	Received of Mission Viejo		FORM JUI
					JUL 2/5 2022		
1. Candidate In	formation:				City Clerk		
NAME OF CANDIDATE (Last, First Middle Initial)			DAYTIME TELEPHONE NUMBER	FAX NUI	MBER (optional)	EMAIL (or	ptional)
Holmes, Stacy J.				()		
STREET ADDRESS			CITY		STATE	ZIP CODE	
OFFICE SOLICITY (DOS	ITION TITLE	AGENCY NAME		PIOTPIOT	AUGUSTO II		
. ,				- 1	NUMBER, if applicab	e. NON-	PARTISAN OFFICE
OFFICE JURISDICTION		City of Missi	on viejo	District	V		REFERENCE: Check one box, if applicable.)
State (Complete					2022		PRIMARY / GENERAL
⊘ City □ C	ounty Mu	Ilti-County:	(Name of Multi-County Jurisdiction)		2022 (Year of Ele		SPECIAL / RUNOFF
☐ I do not ac Amendm ☐ I did n	cept the volument:		or the election stated above.	ld on/_	/ and	I accept	the voluntary expenditure
(Mark if applicable)			981-11				
On,	l c	contributed personal funds	in excess of the expenditure c	eiling for the	election stated	above.	
3. Verification:			Ĭ.	· F			
I certify under	penalty of pe	Signatu	State of California that the former (gladinate)	egoing is true	e and correct.		FPPC Form 501 (Augus

FPPC Form 501 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov