

Candidate Intention Statement

Check One: Initial Amendment (Explain) Party Preference

Date Stamp Received by City Clerk 8/8/2022	CALIFORNIA FORM 501 For Official Use Only
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1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Terri Aprati DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) [REDACTED] EMAIL (optional) [REDACTED]

STREET ADDRESS [REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED]

OFFICE SOUGHT (POSITION TITLE) City Council AGENCY NAME [REDACTED] DISTRICT NUMBER, if applicable, 4 NON-PARTISAN OFFICE

OFFICE JURISDICTION: State (Complete Part 2.) City County Multi-County: MISSION Viejo, Orange (Name of Multi-County Jurisdiction) 2022 (Year of Election)

PARTY PREFERENCE: (Check one box, if applicable.)
 PRIMARY / GENERAL
 SPECIAL / RUNOFF

2. State Candidate Expenditure Limit Statement:

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

(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:

I did not exceed the expenditure ceiling in the primary or special election held on 1/1 and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

On, 1/1 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 August 8, 2022 (month, day, year) Signature Terri Aprati (Candidate)