

Candidate Intention Statement

Check One: Initial Amendment (Explain) _____

FILED
JUL 16 2018
ALBANY CITY CLERK

CALIFORNIA FORM 501
For Official Use Only

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Durón, Clementina DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) _____ E-MAIL (optional) clementina_duron@yahoo.com
 STREET ADDRESS [REDACTED] CITY Albany STATE CA ZIP CODE 94706
 OFFICE SOUGHT (POSITION/TITLE) Board of Education Member AGENCY NAME Albany Unified School District DISTRICT NUMBER, if applicable. _____ NON-PARTISAN
 OFFICE JURISDICTION State (Complete Part 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.)

2018 Primary/general election 2018 Special/runoff 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:
 I did not exceed the expenditure ceiling in the primary or special-election held on: _____ and I accept the voluntary expenditure ceiling for the general or special run-off election.
 (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 07/16/18 Signature [REDACTED]
 (month, day, year) (Candidate)