

Candidate Intention Statement

Check One: Initial Amendment (Explain) _____

Date Stamp
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ALBANY CITY CLERK

CALIFORNIA FORM 501
For Official Use Only

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) JEREMIAH MANUEL GARRETT-PINGUELO DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) () EMAIL (optional) [REDACTED]
STREET ADDRESS [REDACTED] CITY ALBANY STATE CA ZIP CODE 94706
OFFICE SOUGHT (POSITION TITLE) CITY COUNCIL MEMBER AGENCY NAME CITY OF ALBANY DISTRICT NUMBER, if applicable. [REDACTED] NON-PARTISAN OFFICE
OFFICE JURISDICTION (Check one box, if applicable.)
 State (Complete Part 2.) City County Multi-County: _____ (Name of Multi-County Jurisdiction) 2022 (Year of Election) PRIMARY / GENERAL SPECIAL / RUNOFF
PARTY PREFERENCE: DEMOCRAT

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 ___/___/___ 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 04 25 2022 (month, day, year)

Signature

[REDACTED SIGNATURE]