

Candidate Intention Statement

Date Stamp

CALIFORNIA FORM **501**

For Official Use Only

Check One: Initial Amendment (Explain) _____

CITY CLERK OFFICE

1. Candidate Information:

2023 JUL 20 P 2: 16

NAME OF CANDIDATE (Last, First Middle Initial)

DAYTIME TELEPHONE NUMBER

FAX NUMBER (optional)

EMAIL (optional)

Wong, Thomas

(626) 716-0809

CITY OF MONTEREY PARK

STREET ADDRESS

CITY

STATE

ZIP CODE

[REDACTED]

Monterey Park

CA

91754

OFFICE SOUGHT (POSITION TITLE)

AGENCY NAME

DISTRICT NUMBER, if applicable.

NON-PARTISAN OFFICE

City Council

City of Monterey

1

PARTY PREFERENCE:

OFFICE JURISDICTION

(Check one box, if applicable.)

State (Complete Part 2.)

City

County

Multi-County:

(Name of Multi-County Jurisdiction)

2026

(Year of Election)

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: ___/___/___ 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.

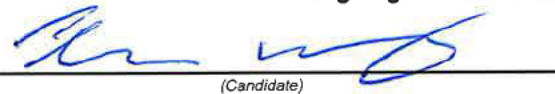
3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

7/17/23
(month, day, year)

Signature


(Candidate)