

Candidate Intention Statement

Check One: Initial

Amendment (Explain) _____

City of Carmel-by-the-Sea

For Official Use Only

Date Stamp

**CALIFORNIA
FORM 501**

JUN 12 2018

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

HUGHES, EUGENE, R

DAYTIME TELEPHONE NUMBER

FAX NUMBER (optional)

E-MAIL (optional)

Received by City Clerk

STREET ADDRESS

[REDACTED]

CITY

CARMEL

STATE

CA

ZIP CODE

93921

EAH@ETRAAD.CO.COM

OFFICE SOUGHT (POSITION TITLE)

Mayor of Carmel

AGENCY NAME

CITY of CARMEL

DISTRICT NUMBER, if applicable

NON-PARTISAN PARTY:

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.)

(Year of Election) Primary/general election

(Year of Election) 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 06/02/2018

(month, day, year)

Signature

[REDACTED]

(Candidate)