

**Candidate Intention Statement**

<small>Date Stamp</small> <b>REGISTRATION ELECTIONS</b>	<b>CALIFORNIA FORM 501</b> <small>For Official Use Only</small>
2017 AUG 18 PM 4:06	

Check One:  Initial  Amendment (Explain) \_\_\_\_\_

**1. Candidate Information:**

NAME OF CANDIDATE (Last, First, Middle Initial) Danrell, Frank C. DAYTIME TELEPHONE NUMBER (209) 247-6024 FAX NUMBER (optional) ( ) E-MAIL (optional) \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

STANISLAUS COUNTY  
CLERK-RECORDER

OFFICE SOUGHT (POSITION TITLE) Stanislaus County Supervisor AGENCY NAME \_\_\_\_\_ DISTRICT NUMBER, if applicable. 4  NON-PARTISAN

OFFICE JURISDICTION \_\_\_\_\_ PARTY: \_\_\_\_\_

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 August 18, 2017  
(month, day, year)

Signature \_\_\_\_\_