

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp RECEIVED AUG 6 2009 Town of San Anselmo	CALIFORNIA FORM 501 For Official Use Only
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Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) KROOT, JEFFREY D.	DAYTIME TELEPHONE NUMBER (415) 456-5531	FAX NUMBER (optional) (415) 456-2258	E-MAIL (optional) JKARCH2@SBCGLOBAL.NET
STREET ADDRESS 222 CRESCENT RD.	CITY SAN ANSELMO	STATE CA	ZIP CODE 94960
OFFICE SOUGHT (POSITION TITLE) COUNCIL MEMBER	AGENCY NAME TOWN OF SAN ANSELMO	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ <small>(Name of Multi-County Jurisdiction)</small>		2009 <small>(Year of Election)</small>	

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to 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 6, 2009**
(month, day, year)

Signature **Jeffrey D. Kroot**
(Candidate)