

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

RECEIVED

AUG 7 2009

Town of San Anselmo

CALIFORNIA FORM 501

For Official Use Only

Check One: [X] Initial [ ] Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) (Kay) COLEMAN KATHARIN P. DAYTIME TELEPHONE NUMBER (415) 453-7327 FAX NUMBER (optional) E-MAIL (optional) STREET ADDRESS 22 AGATHA ST. CITY SAN ANSELMO STATE CA ZIP CODE 94960 OFFICE SOUGHT (POSITION TITLE) SAN ANSELMO TOWN COUNCIL AGENCY NAME TOWN OF SAN ANSELMO DISTRICT NUMBER, if applicable. [X] NON-PARTISAN PARTY: OFFICE JURISDICTION [ ] State (Complete Part 2.) [X] City [ ] County [ ] Multi-County: (Name of Multi-County Jurisdiction) (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

Primary/general election (Year of Election) Special/runoff election (Year of Election)

(Check one box)

[X] 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 7, 2009 (month, day, year)

Signature Katharin P. Coleman (Candidate) (KAY)