

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

RECEIVED
Date Stamp
AUG 6 2009
Town of San Anselmo

CALIFORNIA FORM 501
For Official Use Only

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	E-MAIL (optional)
Freeman, Ted W.	(415) 453-3768	(415) 461-7909	freemanforcouncil@ix.netcom.com
STREET ADDRESS	CITY	STATE	ZIP CODE
8 Meadowcroft Drive	San Anselmo	CA	94960
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN
Councilmember	Town of San Anselmo		PARTY:
OFFICE JURISDICTION			
<input type="checkbox"/> State (Complete Part 2.)			
<input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____			
			2009 (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.)

(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

Ted W. Freeman
(Candidate)