

Candidate Intention Statement

COLERK 20MAY13AM10:14	Date Stamp	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)	EMAIL (optional)
Schultz, Nicholas Bernard Coolon		()	
STREET ADDRESS	CITY	STATE	ZIP CODE
	Burbank	CA	91505
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE
City Council	City of Burbank		
OFFICE JURISDICTION			PARTY PREFERENCE:
<input type="checkbox"/> State (Complete Part 2.)			(Check one box, if applicable.)
<input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____	(Name of Multi-County Jurisdiction)		<input checked="" type="checkbox"/> PRIMARY / GENERAL
	2020		<input type="checkbox"/> SPECIAL / RUNOFF
	(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.)

(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 May 6, 2020
(month, day, year)

Signature _____
(Candidate)