

# Candidate Intention Statement

Check One:  Initial  Amendment  
(Explain)

④JR

CALIFORNIA  
FORM

501

For Official Use Only

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LOS ANGELES COUNTY  
2026 JAN 28 PM 2:40  
PROPOSITION B UNIT

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial)

Alaniz, Elaine

STREET ADDRESS

OFFICE SOUGHT (POSITION TITLE)

OFFICE JURISDICTION

State (Complete Part 2.)

City  County

Multi-County:

DAYTIME TELEPHONE NUMBER

(818) 275-2003

FAX NUMBER (optional)

( )

EMAIL (optional)

elaine4supervisor@gmail.com

CITY

STATE

ZIP CODE

AGENCY NAME

DISTRICT NUMBER, if applicable.

NON-PARTISAN OFFICE

(Name of Multi-County Jurisdiction)

PARTY PREFERENCE:

(Check one box, if applicable.)

2026

PRIMARY / GENERAL

SPECIAL / RUNOFF

## 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

January 28, 2026  
(month, day, year)

Signature

(Candidate)