

Candidate Intention Statement

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CANDIDATE INTENTION STATEMENT

Date Stamp	CALIFORNIA FORM 501 For Official Use Only
RECEIVED BY LOS ANGELES COUNTY 2021 JAN 15 AM 10:34 1/14/2021 GLS PROPOSITION B UNIT	

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE <i>(Last, First, Middle Initial)</i>	DAYTIME TELEPHONE NUMBER	FAX NUMBER <i>(optional)</i>	E-MAIL <i>(optional)</i>
Prang, Jeffrey	(323) 596-3888	()	
STREET ADDRESS	CITY	STATE	ZIP CODE
	Los Angeles	CA	90008
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, <i>if applicable.</i>	<input checked="" type="checkbox"/> NON-PARTISAN
Assessor	LA County		PARTY:
OFFICE JURISDICTION			
<input type="checkbox"/> State <i>(Complete Part 2.)</i>			
<input type="checkbox"/> City <input checked="" type="checkbox"/> County <input type="checkbox"/> Multi-County: _____	<i>(Name of Multi-County Jurisdiction)</i>	2022	<i>(Year of Election)</i>

2. State Candidate Expenditure Limit Statement:

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

2022 *(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 1/11/2021
(month, day, year)

Signature _____