JAN 08 2025

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Date Stamp

RECEIVED BY LOS ANGELES COUNTY 2025 JAN 13 AM 11:48 CAMPAIGN FINANCE

Check One: ☒ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	E-MAIL (optional)
Prang, Jeffrey		( )	

STREET ADDRESS	CITY	STATE	ZIP CODE
	West Hollywood	CA	90069

OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	☒ NON-PARTISAN
County Assessor	LA County		PARTY:

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☐ City ☒ County ☐ Multi-County: _____ (Name of Multi-County Jurisdiction) 2026 (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 and correct.

Executed on 1/3/25 (month, day, year), Signature _____ (Candidate)