

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp

CALIFORNIA FORM 501

For Official Use Only

RECEIVED

Check One: [X] Initial [] Amendment (Explain) _____

'06 FEB 28 P 3:49

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

Curry, Keith D.

DAYTIME TELEPHONE NUMBER

(949) 721 9422

OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH

FAX NUMBER (optional) (949) 721 9437

E-MAIL (optional)

Curryk@PEM.com

STREET ADDRESS

40 Vienna Newport Beach

CITY

STATE

CA

ZIP CODE

92660

OFFICE SOUGHT (POSITION TITLE)

Council member

AGENCY NAME

City of Newport Beach

DISTRICT NUMBER, if applicable.

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[X] NON-PARTISAN

PARTY:

OFFICE JURISDICTION

[] State (Complete Part 2.)

[X] City [] County [] Multi-County: _____

(Name of Multi-County Jurisdiction)

2006

(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.)

____ Primary/general election (Year of Election)

____ Special runoff election (Year of 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 2/28/06 (month, day, year)

Signature [Signature] (Candidate)