

Candidate Intention Statement

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CANDIDATE INTENTION STATEMENT

CALIFORNIA FORM 501

For Official Use Only

Check One:  Initial  Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

NICHOLS, RICHARD A

DAYTIME TELEPHONE NUMBER

(949) 644-7735

OFFICE OF THE CITY CLERK

CITY OF NEWPORT BEACH

E-MAIL (optional)

(949) 640-7316

STREET ADDRESS

519 IRIS AVENUE

CITY

CORONA DEL MAR

STATE

CA

ZIP CODE

92625

OFFICE SOUGHT (POSITION TITLE)

CITY COUNCIL MEMBER

AGENCY NAME

NEWPORT BEACH

DISTRICT NUMBER, if applicable.

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NON-PARTISAN

OFFICE JURISDICTION

State (Complete Part 2.)

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

3/29/06  
(month, day, year)

Signature

Richard A. Nichols  
(Candidate)