

Candidate Intention Statement

Registrar
of Voters

CALIFORNIA
FORM
501

For Official Use Only

Check One: Initial Amendment
(Explain)

AUG 02 2024

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) **Carlos EUSA** DAYTIME TELEPHONE NUMBER **660 562 5311** FAX NUMBER (optional) **N/A** EMAIL (optional) **N/A**

STREET ADDRESS **1713 El Centro St F-21 Seelvey** CITY **CA** STATE **CA** ZIP CODE **92273**

OFFICE SOUGHT (POSITION TITLE) **Trustee School Board Seelvey School** DISTRICT NUMBER, if applicable. NON-PARTISAN OFFICE

OFFICE JURISDICTION State (Complete Part 2.) City County Multi-County: _____ (Name of Multi-County Jurisdiction)

PARTY PREFERENCE: (Check one box, if applicable.) 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:

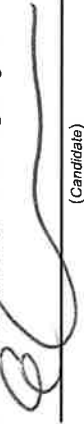
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

7.2.24

(month, day, year)

Signature



(Candidate)