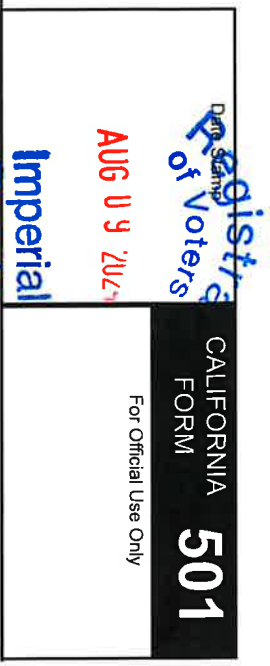


# Candidate Intention Statement


  
 Registrar of Voters  
 AUG 09 2023  
 Imperial County  
 CALIFORNIA FORM 501  
 For Official Use Only

Check One:  Initial  Amendment (Explain)

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Elizabeth Trevino  
 STREET ADDRESS PD Box 463  
 OFFICE SOUGHT (POSITION TITLE) Elementary School District  
 OFFICE JURISDICTION  
 State (Complete Part 2.)  
 City  Multi-County:  
 DAYTIME TELEPHONE NUMBER 760-604-6836  
 FAX NUMBER (optional)  
 DISTRICT NUMBER, if applicable.  
 CITY Gilento  
 STATE CA  
 ZIP CODE 92024  
 PARTY PREFERENCE:  PRIMARY / GENERAL  SPECIAL / RUNOFF  
 (Check one box, if applicable.)

## 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 August 9, 2023 (month, day, year)  
 Signature Elizabeth Trevino  
 (Candidate)