

Candidate Intention Statement

Registrar of Voters
Date Stamps

CALIFORNIA FORM 501
For Official Use Only

AUG 07 2024
Imperial County

Check One: Initial Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Terrazas Frances A., 160, 996-7706 DAYTIME TELEPHONE NUMBER _____ FAX NUMBER (optional) _____ EMAIL (optional) frances.terrazas@gmail.com

STREET ADDRESS 1744 Desert Gardens Dr CITY El Centro STATE CA ZIP CODE 92243

OFFICE SOUGHT (POSITION TITLE) Board Member AGENCY NAME El Centro Elementary School District DISTRICT NUMBER, if applicable. _____ PARTY PREFERENCE: NON-PARTISAN OFFICE PRIMARY / GENERAL SPECIAL / RUNOFF

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

(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 08-05-2024 Signature Frances A. Terrazas
(month, day, year) (Candidate)