

Candidate Intention Statement

Check One: Initial Amendment
(Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Khoury, David, D DAYTIME TELEPHONE NUMBER (760) 854-1865 FAX NUMBER (optional) _____ EMAIL (optional) ddkhoury@hotmail.com

STREET ADDRESS 4400 BGS Bulse Highway CITY Imperial STATE CA ZIP CODE 92246

OFFICE SOUGHT (POSITION TITLE) BOARD OF DIRECTORS - PRESIDENT AGENCY NAME Palmdale Water District DISTRICT NUMBER, if applicable. _____ PARTY PREFERENCE: NON-PARTISAN OFFICE PRIMARY / GENERAL SPECIAL / RUNOFF

OFFICE JURISDICTION State (Complete Part 2) City Multi-County: _____ (Name of Multi-County Jurisdiction) _____ (Year of Election) 2024

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 07/31/2024 Signature David Khoury
(month, day/year) (Candidate)

Registrar of Voting

Imperial County

AUG 06 2024

CALIFORNIA FORM **501**

For Official Use Only