

## Candidate Intention Statement

Check One:  Initial  Amendment  
(Explain)

Registrar  
of Voters  
Date Stamp  
JUL 25 2024  
Imperial  
County

CALIFORNIA FORM 501  
For Official Use Only

### 1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial)

Romualdo S. MEDINA 740, 996-1679 ( ) N/A rmedina@hotmail.com

STREET ADDRESS 6586 Riley Rd CITY, STATE ZIP CODE

Imperial Community College District Area 6 CA 92233

OFFICE SOUGHT (POSITION TITLE)

AGENCY NAME

DISTRICT NUMBER, if applicable.

NON-PARTISAN OFFICE

Imperial Community College District Area 6

6

PARTY PREFERENCE:

(Check one box, if applicable.)

OFFICE JURISDICTION

State (Complete Part 2.)

City  County

Multi-County:

Imperial

(Name of Multi-County Jurisdiction)

2024

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

7-25-24

Signature

  
(Candidate)