

Candidate Intention Statement

Received Date Stamp FEB 10 2026 City Clerk [Redacted]	CALIFORNIA FORM 501 For Official Use Only
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Check One: Initial Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Smith, Joe, C.	DAYTIME TELEPHONE NUMBER [Redacted]	FAX NUMBER (optional) (N/A)	EMAIL (optional) [Redacted]
STREET ADDRESS [Redacted]	CITY Lemon Grove	STATE CA	ZIP CODE [Redacted]
OFFICE SOUGHT (POSITION TITLE) Councilmember - Lemon Grove City Council	AGENCY NAME City of Lemon Grove	DISTRICT NUMBER, if applicable. N/A	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE PARTY PREFERENCE: Democrat
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____	N/A (Name of Multi-County Jurisdiction)	2026 (Year of Election)	(Check one box, if applicable.) <input checked="" type="checkbox"/> 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 February, 5th, 2026
(month, day, year)

Signature _____
[Redacted]