Candidate Intention Statement

Received
Date Stamp
JUN 18 2026
City Clerk
[redacted]

CALIFORNIA FORM **501**
For Official Use Only

Check One: ☑ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial): Smith, Seth A
DAYTIME TELEPHONE NUMBER: [redacted]
FAX NUMBER (optional): ( )
EMAIL (optional): [redacted]
STREET ADDRESS: [redacted]
CITY: Lemon Grove
STATE: CA
ZIP CODE: [redacted]
OFFICE SOUGHT (POSITION TITLE): City Council Member
AGENCY NAME: City of Lemon Grove
DISTRICT NUMBER, if applicable:
☑ NON-PARTISAN OFFICE
PARTY PREFERENCE:
OFFICE JURISDICTION
☐ State (Complete Part 2.)
☑ City ☐ County ☐ Multi-County: _____ (Name of Multi-County Jurisdiction)
2026 (Year of Election)
(Check one box, if applicable.)
☑ 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 June 18th, 2026 *(month, day, year)*

Signature [redacted] (Candidate)