Candidate Intention Statement	Type or Print in Ink.	Date Stamp	CALIFORNIA 501
Check One: ☐ Initial ☑ Amend	ment (Explain) Running for the same office.	TV CLEP 3 PM 02:55	For Official Use Only
1. Candidate Information:		Je	
NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER FAX	X NUMBER (optional) E-MAIL	(optional)
Vasquez, Racquel	() N/A	
STREET ADDRESS	CITY	STATE ZIP CO	
OFFICE SOUGHT (POSITION TITLE)	Lemon Grove AGENCY NAME	CA 9194 DISTRICT NUMBER, if applicable.	NON-PARTISAN
Mayor	City of Lemon Grove	N/A	PARTY: 2024
OFFICE JURISDICTION ☐ State (Complete Part 2.) ☑ City ☐ County ☐ Multi-County:	San Diego County (Name of Multi-County Jurisdiction)	2024 (Year of Election)	
X (Year of Election) Primary/general election (Check one box) I accept the voluntary expenditure ceiling	(Year of Election) Special/runoff election for the election stated above.		
I do not accept the voluntary expenditure Amendment:	e ceiling for the election stated above.		
O I did not exceed the expenditure ce the general or special run-off election	iling in the primary or special election held on:on.	and I accept the volume	ntary expenditure ceiling for
(Mark if applicable) On/, I contributed person	onal funds in excess of the expenditure ceiling for the elec-	ction stated above.	
3. Verification:			
I certify under penalty of perjury under the	ne laws of the	rect.	
Executed on	, Signa	FPPC Toll-Free H	FPPC Form 501 (April/2011) lelpline: 866/ASK-FPPC (866/275-3772)

CANDIDATE INTENTION STATEMENT