

Candidate Intention Statement

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CANDIDATE INTENTION STATEMENT

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OAKLAND

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**CALIFORNIA FORM 501**  
For Official Use Only

Check One:  Initial  Amendment (Explain) \_\_\_\_\_

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Anderson, Jason K DAYTIME TELEPHONE NUMBER ( 510 ) 221-7609 FAX NUMBER (optional) ( ) E-MAIL (optional) omy.ent@gmail.com

STREET ADDRESS 1135 East 18th St. Apt. 12 CITY Oakland STATE Ca ZIP CODE 94606

OFFICE SOUGHT (POSITION TITLE) Mayor AGENCY NAME City of Oakland DISTRICT NUMBER, if applicable \_\_\_\_\_  NON-PARTISAN PARTY: Green Party

OFFICE JURISDICTION  
 State (Complete Part 2)  
 City  County  Multi-County: \_\_\_\_\_ (Name of Jurisdiction) 2014 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

                     Primary/general election                      Special/runoff election  
(Year of Election) (Year of Election)

(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.

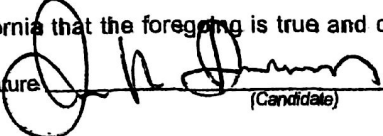
(Mark if applicable)

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 02/18/2014  
(month, day, year)

Signature   
(Candidate)

FPPC Form 501 (Jan/03)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
866/275-3772