| Candidate Intention Statement | | | RECEIVED CALIFORNIA 501 | |
|---|----------------------------------|-------------------------------------|--------------------------------|---------------------------------------|
| Check One: XInitial | Amendment (Explain) | | JUL 2 6 | For Official Use Only |
| | | | ¢ITY CI | LERK |
| . Candidate Information: | | | | |
| IAME OF CANDIDATE (Last, First Middle Init | all DO, JoHN T. | DAYTIME TELEPHONE NUMBER | FAX NUMBER (optional) | EMAIL (optional) |
| | | | () | |
| TREET ADDRESS | · | CITY Lattan | STATE COMMON AND ADMINISTRATE | area o |
| Mayov FFICE SOUGHT (POSITION TITLE) | AGENCY NAME | Lathrop | DISTRICT NUMBER, if applica | 95330 ble. Minon-partisan office |
| MAMOV | City of | hathrof | | PARTY PREFERENCE: |
| FFICE JURISDICTION | J | | | (Check one box, if applicable.) |
| State (Complete Part 2.) | | | 202 | 2 PRIMARY / GENERAL |
| City County Mu | Iti-County: | (Name of Multi-County Jurisdiction) | (Year of E | — — — — — — — — — — — — — — — — — — — |
| Amendment: I do not accept the volument: O I did not exceed the | ntary expenditure ceiling for | r the election stated above. | d on <i>l</i> an | d I accept the voluntary expenditure |
| | eral or special run-off election | | | |
| (Mark if applicable) | | | _ | |
| | ontributed personal funds i | n excess of the expenditure co | eiling for the election stated | i above. |
| . Verification: | | | | i |
| I certify under penalty of pe | rjury under the laws of the | State of California that the fore | egoing is true and correct. | |
| Executed on 37/26/25 | Signature | 4 | | |
| (month, day, | year) | (Candidate) | | FPPC Form 501 (Augu |