

# Candidate Intention Statement

Date Stamp

CALIFORNIA  
FORM  
**501**

For Official Use Only

RECEIVED

Check One:  Initial

Amendment (Explain) \_\_\_\_\_

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial)

Andrew Narong Janz

DAYTIME TELEPHONE NUMBER

( 810 ) 844-6796

2019 APR 26 P 12: 21

FAX NUMBER (optional)

CITY, OF FRESNO

STREET ADDRESS

CITY

CITY CLERK'S OFFICE

ZIP CODE

Fresno

CA

93711

OFFICE SOUGHT (POSITION TITLE)

Mayor

AGENCY NAME

City of Fresno

DISTRICT NUMBER, if applicable

NON-PARTISAN OFFICE

OFFICE JURISDICTION

State (Complete Part 2.)

City

County

Multi-County:

City of Fresno

(Name of Multi-County Jurisdiction)

2020

(Year of Election)

PARTY PREFERENCE:

(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 information provided is true and correct.

Executed on

04/24/2019

(month, day, year)

Signature

FPPC Form 501 (August/2018)  
FPPC Advice: [advice@fppc.ca.gov](mailto:advice@fppc.ca.gov) (866/275-3772)

[www.fppc.ca.gov](http://www.fppc.ca.gov)