

Candidate Intention Statement



CALIFORNIA FORM 501 For Official Use Only

Check One: Initial Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE: Criss, Heather M; DAYTIME TELEPHONE NUMBER: [redacted]; FAX NUMBER: [redacted]; EMAIL: [redacted]; STREET ADDRESS: City Council; CITY: City of Ukiah; STATE: CA; ZIP CODE: 95482; OFFICE SOUGHT: City Council; AGENCY NAME: City of Ukiah; DISTRICT NUMBER: [redacted]; NON-PARTISAN OFFICE: [checked]; PARTY PREFERENCE: [checked] PRIMARY / GENERAL; OFFICE JURISDICTION: [checked] City; Year of Election: 2024

2. State Candidate Expenditure Limit Statement:

(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 8/3/24 (month, day, year) Signature [redacted] (Candidate)