# Candidate Intention Statement

CITY OF UKIAH RECEIVED Date Stamp JUL 20 2026 CITY CLERK UKIAH, CALIFORNIA

CALIFORNIA FORM **501**

For Official Use Only

**Check One:** ☑ Initial ☐ Amendment (Explain) _____

## 1. Candidate Information: Susan Sher

NAME OF CANDIDATE (Last, First Middle Initial) | DAYTIME TELEPHONE NUMBER | FAX NUMBER (optional) | EMAIL (optional)

[redacted] | [redacted] | ( ) | [redacted]

STREET ADDRESS | CITY | STATE | ZIP CODE

[redacted]

OFFICE SOUGHT (POSITION TITLE): City Councilmember

AGENCY NAME: City of Ukiah, CA

DISTRICT NUMBER, if applicable.

☐ NON-PARTISAN OFFICE

PARTY PREFERENCE:

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☑ City ☐ County ☐ Multi-County: _____ (Name of Multi-County Jurisdiction)

2026 (Year of Election)

(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 foregoing is true and correct.

Executed on 7/20/26 (month, day, year) Signature [redacted] (Candidate)