

Candidate Intention Statement

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 CITY OF COSTA MESA
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CALIFORNIA FORM 501
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Check One: Initial Amendment (Explain)

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Stephans John B. DAYTIME TELEPHONE NUMBER (714) 337 1872 FAX NUMBER (optional) (949) 468 3201 EMAIL (optional) jstephans@bfk.law
 STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

OFFICE SOUGHT (POSITION TITLE) Mayor AGENCY NAME Costa Mesa DISTRICT NUMBER, if applicable. _____ NON-PARTISAN OFFICE
 PARTY PREFERENCE: _____

OFFICE JURISDICTION (Check one box, if applicable.)
 State (Complete Part 2.) City County Multi-County: _____ (Name of Multi-County Jurisdiction) _____
 (Year of Election) 2024 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 3/7/24 Signature _____
 (month, day, year) (Candidate)