Candidate Intention Statement	Date Stamp RECEIVED	california 501
Check One: Amendment (Explain)	JUL 1 5 2024 🌿	For Official Use Only
	CITY OF LINCOLN	
1. Candidate Information:		
NAME OF CANDIDATE (Last, First Middle Initial) DAYTIME TELEPHONE NUMBER FAX NUM	MBER (optional) EMAIL (op	tional)
KEVIN GREGORY F		
STREET ADDRESS CITY	STATE ZIP CODE	
- · · · · ·	NUMBER, if applicable.	PARTISAN OFFICE
TREASURED CITY OF LINCOLN		REFERENCE:
OFFICE JURISDICTION State (Complete Part 2.)		Check one box, if applicable.) PRIMARY / GENERAL
City County Multi-County TREASURES	2024	SPECIAL/RUNOFF
(Name of Multi-County Jurisdiction)	(Year of Election)	3 SPECIAL / RUNOFF
(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 ceil-
ing for the general or special run-off election.		
(Mark if applicable)		
On I contributed personal funds in excess of the expenditure ceiling for the ele	ection 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 TULY 15 ZOZY Signature Signature (Candidate)		FPPC Form 501 (August/20