Candidate Intention Statement	RECEIVED BY FORM 501 ANGELES COUNTY For Official Use Only
Check One: ☑ Initial ☐ Amendment (Explain)	2020 NOV 30 PM 1: 38
1. Candidate Information:	CAMPAIGH FINANCE
NAME OF CANDIDATE (Last, First Middle Initial) DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional) EMAIL (optional)
Del Real, Enrique (562) 761-5379 STREET ADDRESS Norwalk,	() Chriquedelreale gmail.co CA. 90650
Sheriff OFFICE JURISDICTION AGENCY NAME LOS Angeles County Sheriff OFFICE JURISDICTION	DISTRICT NUMBER, if applicable. NON-PARTISAN OFFICE
State (Complete Part 2.)	PRIMARY/GENERAL
City County Multi-County: (Name of Multi-County Jurisdiction)	(Year of Election) SPECIAL / RUNOFF
(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: O I did not exceed the expenditure ceiling in the primary or special election held ceiling for the general or special run-off election.	d on and I accept the voluntary expenditure
(Mark if applicable)	
On,I contributed personal funds in excess of the expenditure ce	iling for the election stated above.
Verification: I certify under penalty of perjury under the laws of the State of California that the fore	going is true and correct.
Executed on 11-27-2020 Signature . (Candidata)	FPPC Form 501 (August/2018)