

**Candidate Intention Statement**

Check One:  Initial  Amendment (Explain) \_\_\_\_\_

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2019 APR 17 AM 8: 08

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Date Stamp

CALIFORNIA FORM **501**

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PROPOSITION B UNIT

CAMPAIGN FINANCE

**1. Candidate Information:**

NAME OF CANDIDATE (Last, First Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	EMAIL (optional)
Jeong, Chan Y	( 818 ) 246-9524	( )	jeong4LAcounty@gmail.com
STREET ADDRESS	CITY	STATE	ZIP CODE
	Glendale	CA	91207
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable	<input type="checkbox"/> NON-PARTISAN OFFICE
County Supervisor	Los Angeles County Board of Supervisors	District 2	PARTY PREFERENCE: Democratic Party
OFFICE JURISDICTION	(Check one box, if applicable.)		
<input type="checkbox"/> State (Complete Part 2.)	<input checked="" type="checkbox"/> PRIMARY / GENERAL		
<input type="checkbox"/> City <input checked="" type="checkbox"/> County <input type="checkbox"/> Multi-County: _____	<input type="checkbox"/> SPECIAL / RUNOFF		
	(Name of Multi-County Jurisdiction)	2020	(Year of Election)

**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 4/12/2019  
(month, day, year)

Signature \_\_\_\_\_  
(Candidate)