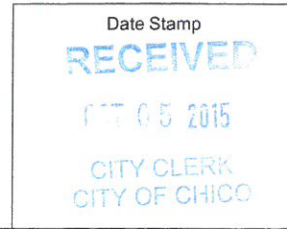


Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT



CALIFORNIA FORM 501 For Official Use Only

Check One: [X] Initial [] Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) DAYTIME TELEPHONE NUMBER FAX NUMBER (optional) E-MAIL (optional)
Torres, Loretta, A (530) 879-4203 () riceaplenty@att.net
STREET ADDRESS CITY STATE ZIP CODE
[REDACTED] Chico CA 95973
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME DISTRICT NUMBER, if applicable. [X] NON-PARTISAN
City Council City of Chico PARTY:
OFFICE JURISDICTION
[] State (Complete Part 2.)
[X] City [] County [] Multi-County: _____ 2016
(Name of Multi-County Jurisdiction) (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

____ Primary/general election (Year of Election) _____ Special/runoff election (Year of Election)

(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 10/2/15 (month, day, year)

Signature [Handwritten Signature] (Candidate)