

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Date Stamp

CALIFORNIA FORM 501

For Official Use Only

Check One: Initial Amendment (Explain) Amend for New Cycle

RECEIVED

2009 JUN 16 P 5:49

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Lisa Bartlett DAYTIME TELEPHONE NUMBER 949-903-8717 FAX: NUMBER (optional) POINTE-MAIL (optional) lisa@lisa4dp.com STREET ADDRESS 34871 Doheny Place CITY Capistrano Beach STATE CA ZIP CODE 92624 OFFICE SOUGHT (POSITION TITLE) City Council Member AGENCY NAME City of Dana Point DISTRICT NUMBER, if applicable. 0 PARTY: [X] NON-PARTISAN OFFICE JURISDICTION [X] City [] County [] Multi-County: Dana Point (Name of Jurisdiction) 2010 (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 6/16/09 (month, day, year)

Signature Lisa Bartlett (Candidate)