

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Check One:  Initial

~~Amendment (Explain)~~ Candidate for the  
Election as Mayor 2011

Date Stamp  
**RECEIVED**  
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**CALIFORNIA FORM 501**  
For Official Use Only

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) PAUL ROGARD DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) [REDACTED] E-MAIL (optional) [REDACTED]

STREET ADDRESS [REDACTED] CITY PASADENA STATE CA ZIP CODE 9105-2909

OFFICE SOUGHT (POSITION/TITLE) Mayor of Pasadena AGENCY NAME [REDACTED] DISTRICT NUMBER, if applicable [REDACTED]  NON-PARTISAN PARTY:

OFFICE JURISDICTION:  
 State (Complete Part 2)  
 City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction)  
 \_\_\_\_\_ (Year of Election) 2011

2. State Candidate Expenditure Limit Statement:

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

\_\_\_\_\_  
(Year of Election) Primary/general election \_\_\_\_\_  
(Year of Election) Special/runoff 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 October 27, 2010  
(month, day, year)

Signature Bill Rogard  
(Candidate)