Candidate Intention Statement		Date Stamp	california 501
Check One: ⊠ Initial ☐ Amendment (Exp	xplain)	RECEIVED GITY OF BEVERLY	For Official Use Only Indexed 12/5/16 ho
1. Candidate Information:		2011 DEC -5 P	12: 10
NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	Lt (optional)
John A. Mirisch	(310) 425-2196	(373) 782-1149	john @ reelectmirisch. co.
STREET ADDRESS	CITY	STATE ZIP C	ODE
455 S. Clark Dr.,	Beverly Hills	CA 902	
OFFICE SOUGHT (POSITION TITLE) AGENCY N		DISTRICT NUMBER, if applicable	NON-PARTISAN
	Beverly Hills		PARTY:
OFFICE JURISDICTION State (Complete Part 2.)			
☐ City ☐ County ☐ Multi-County:	(Name of Multi-County Jurisdiction)	2017 (Year of Election)	
Gilly Gounty Gilwatt-oddity.	(Name of Multi-County Jurisdiction)	(real of Election)	
2017 (Year of Election) (Check one box) ☑ I accept the voluntary expenditure ceiling for the election Amendment: ☐ I did not exceed the expenditure ceiling in the the general or special run-off election.	r the election stated above.	// and I accept the vo	luntary expenditure ceiling for
(Mark if applicable) On/, I contributed personal funds	in excess of the expenditure ceiling for t	the election stated above.	
3. Verification:			
I certify under penalty of perjury under the laws of Executed on <u>Jec.</u> , Sold (month, day, year)	ignature (Condidate)		FPPC Form 501 (Jan/2016) PC Advice: advice@fppc.ca.gov (866/275-3772)

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