

Candidate Intention Statement

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Check One: [X] Initial [ ] Amendment (Explain) \_\_\_\_\_

CITY OF WESTLAKE VILLAGE WESTLAKE VILLAGE, CA

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Brad Halpern DAYTIME TELEPHONE NUMBER ( 818 ) 292-6080 FAX NUMBER (optional) ( ) EMAIL (optional) STREET ADDRESS CITY STATE ZIP CODE

OFFICE SOUGHT (POSITION TITLE) City Councilmember AGENCY NAME City of Westlake Village DISTRICT NUMBER, if applicable. [X] NON-PARTISAN OFFICE PARTY PREFERENCE:

OFFICE JURISDICTION (Check one box, if applicable.) [ ] State (Complete Part 2.) [X] City [ ] County [ ] Multi-County: (Name of Multi-County Jurisdiction) 2022 (Year of Election) [X] PRIMARY / GENERAL [ ] SPECIAL / RUNOFF

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 7/26/22 (month, day, year) Signature [Redacted]