

Candidate Intention Statement

Filed NOV 29 2023 Tulare County Clerk Deputy [Signature]	Date Stamp
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Check One: ☒ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) <u>Duce, Darren - M</u>	DAYTIME TELEPHONE NUMBER [REDACTED]	FAX NUMBER (optional) ()	EMAIL (optional)
STREET ADDRESS [REDACTED]	CITY <u>Sonora</u>	STATE <u>CA</u>	ZIP CODE <u>95370</u>
OFFICE SOUGHT (POSITION TITLE) <u>Sonora City Council</u>	AGENCY NAME	DISTRICT NUMBER, if applicable.	☒ NON-PARTISAN OFFICE
OFFICE JURISDICTION ☐ State (Complete Part 2.) ☒ City ☐ County ☐ Multi-County: _____ (Name of Multi-County Jurisdiction)	PARTY PREFERENCE: (Check one box, if applicable.) ☒ 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 Nov. 29th 2023
(month, day, year)

Signature _____
[REDACTED]