

# Candidate Intention Statement

Check One:  Initial

Amendment (Explain) \_\_\_\_\_

BY

**F-1 Ballot**  
REGISTRAR OF VOTERS  
**SEP 08 2021**  
DONNA M. JOHNSTON  
DEPUTY CLERK

CALIFORNIA  
FORM  
**501**  
For Official Use Only

## 1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)

Reusser, Tom

DAYTIME TELEPHONE NUMBER

( 530 ) 788-8954

FAX NUMBER (optional)

EMAIL (optional)

STREET ADDRESS

Yuba City

STATE

CA

ZIP CODE

95991

OFFICE SOUGHT (POSITION TITLE)

Sutter County Superintendent of Schools

AGENCY NAME

Sutter County

DISTRICT NUMBER, if applicable

NON-PARTISAN OFFICE

PARTY PREFERENCE:

(Check one box, if applicable.)

State (Complete Part 2.)

City

County

Multi-County:

(Name of Multi-County Jurisdiction)

2022

(Year of Election)

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

9

8

2021

(month, day, year)

Signature



(Candidate)