

Candidate Intention Statement

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

1. Candidate Information:

NAME OF CANDIDATE Perez, YADIRA DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) () EMAIL (optional) STREET ADDRESS [REDACTED] CITY Coachella STATE CA ZIP CODE 92236 OFFICE SOUGHT (POSITION TITLE) City Council AGENCY NAME Riverside County DISTRICT NUMBER, if applicable. [] NON-PARTISAN OFFICE OFFICE JURISDICTION [] State (Complete Part 2.) [X] City [] County [] Multi-County: (Name of Multi-County Jurisdiction) PARTY PREFERENCE: [] SPECIAL / RUNOFF [X] PRIMARY / GENERAL (Year of Election) 2024

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 2-20-24 (month, day, year) Signature [REDACTED]