

Expenditure Ceiling Statement

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CITY OF SAN JOSÉ
ELECTION 2006
FORM 500

Amendment, check only if applicable

I Candidate Information:

NAME OF CANDIDATE: PETER M. CONSTANT DAYTIME TELEPHONE NUMBER: (408) 482-3686 FAX NUMBER: (408) 261-8709

MAILING ADDRESS STREET CITY ZIP CODE
962 WESTMONT CT. SAN JOSE, CA 95117

OFFICE SOUGHT: CITY COUNCIL DISTRICT NUMBER, IF APPLICABLE: DISTRICT 1

OFFICE JURISDICTION (Check one box)

State County of _____

City of SAN JOSE Multi-County _____

II Declaration Pursuant to San José Municipal Code Title 12, Part 5, Sections 12.06.500 – 12.06.560

Date of Election: 6 / 6 / 06 (Election Date)

(Check one box)

I accept the voluntary expenditure ceiling for the election stated above. I will not transfer campaign funds collected for the primary to any ballot measure committee.

I do not accept the voluntary expenditure ceiling for the election stated above.

Date of General Election – if applicable: 11 / 7 / 06 (Election Date)

(Check one box)

I accept the voluntary expenditure ceiling for the election stated above. I will not transfer campaign funds collected for the election stated above to any ballot measure committee.

I do not accept the voluntary expenditure ceiling for the election stated above.

III Ceiling Threshold: [Check applicable box(es)]

I reached 65% of the expenditure ceiling on: / / (month, day, yr)

I exceeded 75% of the expenditure ceiling on: / / (month, day, yr)

IV Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on DECEMBER 9, 2005 Signature [Signature]

(month, day) (year) (Candidate)