Candidate Intention Statement	Type or Print in Ink.	OFFICE OPENT PREMICITY CL CALIF	ORNIA 501
Check One: Initial Amendment (Explain)	FU	or Official Use Only
1. Candidate Information: NAME OF CANDIDATE (Last, First, Middle Initial) Askew Bane Capital Ruly formation of the Capital R	DAYTIME TELEPHONE NUMBER Rige (330) CITY OAKland F Oakland (Name of Multi-County Jurisdiction)	FAX NUMBER (optional) STATE CA DISTRICT NUMBER, if applicable. PARTY:	epublican
2. State Candidate Expenditure Limit Stateme (CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates) (Check one box) 1 accept the voluntary expenditure ceiling for the election Amendment: 1 did not exceed the expenditure ceiling in the particular of election.	tes for local offices do not complete Part 2.) Special/runoff election tion stated above. the election stated above.	ر and I accept the voluntary expen	diture ceiling for
(Mark if applicable) On, I contributed personal funds in 3. Verification: I certify under penalty of perjury under the laws of the second contributed personal funds in the second contributed			
Executed on 3 • 11 • 2014, Sign	nature	FPPC Toll-Free Helpline: 866	PPC Form 501 (April/2011) /ASK-FPPC (866/275-3772)