

# Candidate Intention Statement

Check One:

☒ Initial

☐ Amendment  
(Explain)

<b>RECEIVED</b> AUG 14 2024 City of Banning City Clerk's Office	CALIFORNIA FORM
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## 1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial)

COULA RINGGOLD

DAYTIME TELEPHONE NUMBER

(951) 544-5873

FAX NUMBER (optional)

( )

EMAIL (optional)

Coula1@hotmail.com

OFFICE SOUGHT (POSITION TITLE)

City Treasurer

AGENCY NAME

CITY OF BANNING

DISTRICT NUMBER, if applicable.

N/A

☒ NON-PARTISAN OFFICE

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☒ City

☐ County

☐ Multi-County:

San Diego

(Name of Multi-County Jurisdiction)

(Check one box, if applicable.)

☒ PRIMARY / GENERAL

☐ SPECIAL / RUNOFF

2024  
(Year of Election)

## 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

08/13/24

(month, day, year)

Signature

Coula Ringgold

(Candidate)