		ž v		
Candidate Intention Stat	tement		Date Stam	'
Check One: [7] Initial	Amendment (Explain)		harm girth bened space	For Official Use Only
- Inda			0,5	undered of
			Francis Spaces	811112021 197
1. Candidate Information:				
NAME OF CANDIDATE (Last, First Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUM	IBER (optional)	EMAIL (optional)
Wunderlich, Robert		())	
STREET ADDRESS	CITY		STATE	ZIP CODE
OFFICE COURTY (DOCUTION TITLE)	Beverly Hills	INISTRICT	CA NUMBER if applicable	90212 e. NON-PARTISAN OFFICE
OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT	NOWINER, II applicable	
City Councilmember OFFICE JURISDICTION	City of Beverly Hills	<u> </u>		PARTY PREFERENCE: (Check one box, if applicable.)
State (Complete Part 2.)			2022	PRIMARY / GENERAL
City County Multi-C	County: (Name of Multi-County Jurisdiction)		2022 (Year of Ele	- CRECIAL / BUNGES
(Check one box)	enditure ceiling for the election stated above.			
☐ I do not accept the volunta	ary expenditure ceiling for the election stated above.			
Amendment:				
	expenditure ceiling in the primary or special election held on all or special run-off election.	n/	/ and	I accept the voluntary expenditure
(Mark if applicable)				
☐ On,I con	ntributed personal funds in excess of the expenditure ceiling	g 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 August 10 (month, day, yea	2021 Signature Robett Wunde (Candidate)	sli	<u> </u>	FPPC Form 501 (August