Candidate Intention Statement	CALIFORNIA 501
Check One: Amendment (Explain)	AUG 15 2022 For Official Use Only
	CITY CLERK CITY OF PIEDMONT
1. Candidate Information:	OH TOT TIES
	TIME TELEPHONE NUMBER FAX NUMBER (optional) EMAIL (optional)
MEDHERAR, RUCHI S	()
STREET ADDRESS PIEDMONT	STATE ZIP CODE CA 94611
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME	DISTRICT NUMBER, if applicable. NON-PARTISAN OFFICE
BOARD OF EDUCATION NEMBER PUS	PARTY PREFERENCE:
OFFICE JURISDICTION	(Check one box, if applicable.)
State (Complete Part 2.)	2022 PRIMARY/GENERAL
City County Multi-County: (Name	of Multi-County Jurisdiction) (Year of Election) SPECIAL / RUNOFF
(Check one box) I accept the voluntary expenditure ceiling for the election of the election o	
 I did not exceed the expenditure ceiling in the primary ceiling for the general or special run-off election. 	or special election held on/ and I accept the voluntary expenditure
(Made if applicable)	
(Mark if applicable)	
On,I contributed personal funds in excess	s of the expenditure ceiling for the election stated above.
3. Verification:	
I certify under penalty of perjury under the laws of the State of	f California, that the foregoing is true and correct.
Executed on Awar K. 7022 Signature (month, bay, year)	(Candidate)

FPPC Form 501 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov