



Check One:  Initial  Amendment (Explain) re-election as incumbent city council member

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) BARRETT, TERESA E. DAYTIME TELEPHONE NUMBER 707.953.0846 FAX NUMBER (optional) 707.762-0111 E-MAIL (optional) teresapetaluma@comcast.net  
STREET ADDRESS P.O. Box 901 CITY PETALUMA STATE CA ZIP CODE 94953-0901  
OFFICE SOUGHT (POSITION TITLE) CITY COUNCIL AGENCY NAME CITY OF PETALUMA DISTRICT NUMBER, if applicable.  NON-PARTISAN PARTY:  
OFFICE JURISDICTION  State (Complete Part 2.)  City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) 2010 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

\_\_\_\_\_  
(Year of Election) Primary/general election Special/runoff election  
(Year of Election)

(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 June 30 2010  
(month, day, year)

Signature Teresa E Barrett  
(Candidate)