andidate Intention Statement		Date Stam	CALIFORNIA 501
Check One: Initial Amendment (Explain)		RECEIVED BY LOS ANGELES COUN	
	2023 DEC -4 AM 8: 53		
		PROPOSITION R UN	IT.
. Candidate Information:		FROFUSITION D UN	
IAME OF CANDIDATE (Last, First Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	EMAIL (optional)
Marroquin Marlon	(954) 295-1092	() mar	lon @marlon 4district 5.0
TREET ADDRESS	Liftherock	STATE CA	93543
OFFICE SOUGHT (POSITION TITLE) AGENCY NA		DISTRICT NUMBER, if applicable	2. NON-PARTISAN OFFICE
Supervisor District 5		5	PARTY PREFERENCE:
DFFICE*JURISDICTION State (Complete Part 2.)			(Check one box, if applicable.) PRIMARY / GENERAL
City County Multi-County:		2029	SPECIAL / RUNOFF
	(Name of Multi-County Jurisdiction)	(,
(Check one box) I accept the voluntary expenditure ceiling for the I do not accept the voluntary expenditure ceiling			
Amendment: I did not exceed the expenditure ceiling in the ing for the general or special run-off election.		and la	accept the voluntary expenditure ceil-
(Mark if applicable)			
On I contributed personal fun	ds in excess of the expenditure ceiling	g for the election stated abo	ove.
3. Verification:			
I certify under penalty of perjury under the laws of the	ne State of California that the foregoin	g is true and correct.	
Executed on 12 - 04 - 2025 Sign (month, day, year)	gnature		
(month, day, year)	(Candidate)		