Candidate Intention Statement

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CITY OF SIMI VALLEY

2018 FEB -9 PM 3: 30

Date Stamp

OFFICE OF CITY CLERK
BY

Check One: ☒ Initial ☐ Amendment (Explain) _____

_____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)
Mashburn, Keith L

DAYTIME TELEPHONE NUMBER
( )

FAX NUMBER (optional)
( )

E-MAIL (optional)

STREET ADDRESS	CITY	STATE	ZIP CODE
	Simi Valley	Ca	93065

OFFICE SOUGHT (POSITION TITLE)
Mayor

AGENCY NAME
City of Simi Valley

DISTRICT NUMBER, if applicable.

☒ NON-PARTISAN

PARTY:

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☒ City ☐ County ☐ Multi-County: _____
(Name of Multi-County Jurisdiction)

2018
(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.)

_____ **Primary/general election**
(Year of 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 _____2/9/2018_____, Signature _____
(month, day, year)   (Candidate)