

Candidate Intention Statement

Date Stamp CITY OF SIMI VALLEY 2018 JUL 19 PM 2:56 OFFICE OF CITY CLERK BY: <i>[Signature]</i>	CALIFORNIA FORM 501 For Official Use Only
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Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) *Carl J. Mercado* DAYTIME TELEPHONE NUMBER _____ FAX NUMBER (optional) _____ E-MAIL (optional) _____

STREET ADDRESS _____ CITY *Simi Valley Cal.* STATE *Ca.* ZIP CODE *93065*

OFFICE SOUGHT (POSITION TITLE) *Mayor of Simi Valley Ca.* AGENCY NAME *Simi Valley Cal.* DISTRICT NUMBER, if applicable. *None* NON-PARTISAN PARTY: _____

OFFICE JURISDICTION
 State (Complete Part 2.)
 City County Multi-County: _____ (Name of Multi-County Jurisdiction) Year of Election *2018*

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

(Year of Election) **Primary/general election** _____
(Year of Election) **Special/runoff 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 *7-19-18*, Signature *Carl J. Mercado*
(month, day, year) (Candidate)