

Candidate Intention Statement

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 OCT 11 2017  
 CITY OF PASO ROBLES

CANDIDATE INTENTION STATEMENT  
 CALIFORNIA FORM 501  
 For Official Use Only

Check One:  Initial  Amendment (Explain) \_\_\_\_\_

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Martin, Steven W. DAYTIME TELEPHONE NUMBER [REDACTED] FAX NUMBER (optional) ( ) E-MAIL (optional) [REDACTED]

STREET ADDRESS [REDACTED] CITY Paso Robles STATE CA ZIP CODE 93446

OFFICE SOUGHT (POSITION TITLE) Mayor, City of Paso Robles AGENCY NAME \_\_\_\_\_ DISTRICT NUMBER, if applicable.  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 10/11/17 Signature [REDACTED]  
(month, day, year) (Candidate)