

Candidate Intention Statement

Date Stamp <b>RECEIVED</b> JUL 22 2016 CITY CLERK CITY OF CHICO	<b>CALIFORNIA FORM 501</b> For Official Use Only
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Check One:  Initial  Amendment (Explain) \_\_\_\_\_

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Macias, Mercedes DAYTIME TELEPHONE NUMBER (530) [REDACTED] FAX NUMBER (optional) ( ) E-MAIL (optional) [REDACTED]

STREET ADDRESS [REDACTED] CITY Chico, CA 95928

OFFICE SOUGHT (POSITION TITLE) Councilmember AGENCY NAME City of Chico DISTRICT NUMBER, if applicable. n/a  NON-PARTISAN PARTY:

OFFICE JURISDICTION  State (Complete Part 2.)  City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) 2016 (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.)

\_\_\_\_\_  
(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 07/22/16 Signature Mercedes Macias  
(month, day, year) (Candidate)