

Candidate Intention Statement

Date Stamp RECEIVED JUL 14 2020 CITY CLERK'S DIVISION CITY OF MOORPARK CALIFORNIA FORM 501 For Official Use Only

Check One: [X] Initial [ ] Amendment (Explain) \_\_\_\_\_

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) DAYTIME TELEPHONE NUMBER FAX NUMBER (optional) EMAIL (optional) Simons, Kenneth R. ( 818 ) [redacted] ( ) ken4council@gmail.com STREET ADDRESS CITY STATE ZIP CODE [redacted] Moorpark CA 93021 OFFICE SOUGHT (POSITION TITLE) AGENCY NAME DISTRICT NUMBER, if applicable. [X] NON-PARTISAN OFFICE Councilmember City of Moorpark 2 PARTY PREFERENCE: OFFICE JURISDICTION (Check one box, if applicable.) [ ] State (Complete Part 2.) [X] City [ ] County [ ] Multi-County: Moorpark (Name of Multi-County Jurisdiction) 2020 (Year of Election) [ ] PRIMARY / GENERAL [ ] SPECIAL / RUNOFF

2. State Candidate Expenditure Limit Statement:

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

(Check one box)

- [ ] I accept the voluntary expenditure ceiling for the election stated above. [X] 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 7/14/20 (month/day/year) Signature [redacted] (Candidate)