Check One:	andidate Ir	ntention St	atement				LE INDate Sa	CALIFORNIA FO
Candidate Information:  MAC OF CANDIDATE (Just First Midde Install)  AGENCY NAME  City STATE 2IP CODE  Moreno Valley CA 92553  FICE SOUGHT (POSITION TITLE)  AGENCY NAME  City of Moreno Valley  City of Moreno Valley  DISTRICT NUMBER, it applicable)  Cony County Multi-County Aurisdiction)  State Candidate Expenditure Limit Statement:  all PERS and CalSTRS and calsTRS and dearless, judges, judical candidates, and candidates for local offices do not complete Part 2.)  (Check one box)  I do not accept the voluntary expenditure ceiling for the election stated above.  Amendment:  O I did not accept the voluntary expenditure ceiling for the election stated above.  Amendment:  O I did not accept the voluntary expenditure ceiling in the primary or special election held on ceiling for the election stated above.  Constitute of the special run-off election.  Verification:  I certify under penalty of perjury under the laws of the State of California to the special run-off election.  DAYTIME TELEPHONE NUMBER (spikonal)  EMAIL (optional)	Check One:	<b>☑</b> Initial	☐ Amendment (Explain)		R	FOT	VALLEY	FORM 501
DAYTIME TELEPHONE NUMBER (optional) (and price of CANDIDATE (Last. First Middle Initials) (and price of CANDIDATE (Last. First Middle Initials) (and price of Carado (Cercardo (					22 JA		FII 3: 27	
Accade, Gerardo    Complete Part Number   Complete Part 2   Complete Part 2	Candidate Ir	nformation:						
STATE   ZIP CODE	ME OF CANDIDATE	(Last, First Middle Initial	1)	DAYTIME TELEPHONE NUMB	ED 6	AV NIIIA	ARER (antiI)	
Moreno Valley  Moreno Valley  CA  92553  DISTRICT NUMBER, if applicables  City of Moreno Valley  City of Moreno Valley  DISTRICT NUMBER, if applicables  (Check one box, if applicables)  (Check one box)  Amendment:  I do not accept the voluntary expenditure ceiling for the election stated above.  Amendment:  I do not accept the voluntary expenditure ceiling in the primary or special election held on ceiling for the general or special run-off election.  (Mark if applicable)  (Mark if applicable)  (Mark if applicable)  Correct.  Executed on  O1  12  2022  PRIMARY / GENERAL  (Check one box)  I did not exceed the expenditure ceiling for the election stated above.  (Mark if applicable)  Correct.  State Candidate State of Ceilife in the state of Ceilife in the election stated above.  Correct.				THE NOME TO ME		AX NUN	ibek (optional)	EMAIL (optional)
Moreno Valley  AGENCY NAME City Council Member City of Moreno Valley  DISTRICT NUMBER, if applicable (Onches Part 2.) State Candidate Expenditure Limit Statement:  APPERS and CalSTRS candidates, judges, judicial candidates, and candidates, and candidates for local offices do not complete Part 2.)  (Check one box) I do not accept the voluntary expenditure ceiling for the election stated above.  Amendment:  I do not accept the expenditure ceiling in the primary or special election held on 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.  Verification:  Lecerify under penalty of perjury under the laws of the State of Celliferate the Above to Correct.  Executed on 1 12 2022	REET ADDRESS			CITY	(	)	STATE	ZIP CODE
AGENCY NAME  (ity Council Member   City of Moreno Valley   1   PARTY PREFERENCE:  (Check one box)   State Candidate Expenditure Limit Statement:    City and cardidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)    Cick one box)   It 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 ceiling for the general or special run-off election.    Amendment:				Moreno Valley			CA	
City of Moreno Valley   1   PARTY PREFERENCE:		•			DI	STRICT		
State Candidate Expenditure Limit Statement:  all PERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)  (Check one box)  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   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.  Verification:  I certify under penalty of perjury under the laws of the State of California black that the face of Californ			City of Moren	o Valley	1			
Caurity   County   Multi-County: (Name of Multi-County Jurisdiction)   2022   PRIMARY / GENERAL								
State Candidate Expenditure Limit Statement:    Check one box	_		County				2022	☐ PRIMARY / GENERAL
State Candidate Expenditure Limit Statement:  aiPERS 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.  Amendment:  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.  Verification:  I certify under penalty of perjury under the laws of the State of California that the formula is in a correct.  Security of the state of California that the formula is in a correct.	<b>L</b> >	L Maid	-county.	(Name of Multi-County Jurisdiction)			(Year of El-	ection) SPECIAL / RUNOFF
(Mark if applicable)  On,/I contributed personal funds in excess of the expenditure ceiling for the election stated above.  Verification:  I certify under penalty of perjury under the laws of the State of Cellifornia that the formula th	☐ I accept the	cept the volunt						
(Mark if applicable)  On,/I contributed personal funds in excess of the expenditure ceiling for the election stated above.  Verification:  I certify under penalty of perjury under the laws of the State of Collegenia that the formula for the election stated above.  Executed on	O I did no ceiling	ot exceed the e for the genera	expenditure ceiling in the p al or special run-off electio	orimary or special election b n.	neld on _	/_	/ and	I accept the voluntary expenditure
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I certify under penalty of perjury under the laws of the State of College	□ On,	/ I cor	ntributed personal funds in	excess of the expenditure	ceiling fo	the e	election stated	above.
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				State of College to the table of			correct.	