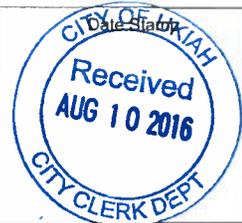


Candidate Intention Statement



CALIFORNIA FORM 501 For Official Use Only

Check One: [X] Initial [] Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE: Stephen G. Scalmanini; DAYTIME TELEPHONE NUMBER: (707) 391-5853; FAX NUMBER: (); E-MAIL: sscalmanini@yahoo.com; STREET ADDRESS: 907 N Oak St; CITY: Ukiah; STATE: CA; ZIP CODE: 95482; OFFICE SOUGHT: City Council; AGENCY NAME: City of Ukiah; DISTRICT NUMBER: ; [X] NON-PARTISAN; OFFICE JURISDICTION: [X] City [] County [] Multi-County; Year of Election: 2016

2. State Candidate Expenditure Limit Statement:

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

Primary/general election (Year of Election) Special/runoff election (Year of Election)

(Check one box)

- [X] 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 August 10, 2016 (month, day, year) Signature Stephen G. Scalmanini (Candidate)