Of	ficeholder and Candidate				MUREON SAMPALLE CALIFORNIA 470	
Campaign Statement - Short Form		Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)		RECEIVED 16 AUG -8 AM 9: 2	FORM 4/U
		11/08/2016			-	
1.	Statement Covers Calendar Year	20 16 .				
2.	Officeholder or Candidate Information			3. Office Sought or Held		
	NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE SOUGHT OR HELD			
	Gerardo Mercado			City Council		
	STREET ADDRESS			JURISDICTION (LOCATION) DISTRICT NUMBER		
				Moreno Valle	еу	(IF APPLICABLE)
	CITY	STATE ZIP COD	DE			
	Moreno Valley AREA CODE/DAYTIME PHONE NUMBER	CA 9255 OPTIONAL: FAX/E-MAIL				
4.	Committee Information List all committees of which you have known COMMITTEE NAME AND I.D. NUMBER	owledge that are primarily forr	med to receive contr		1	our candidacy.
					IVINO	L OF TREASURER
5.	Verification					
ο.	I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. 8/8/2016					
	Executed on DATE			By SIGNATURE OF OFFICEHOLDER OR CANDIDATE		
	Clear Form Print Form					