Candidate Intention Statement	Type or Print in Ink.	CITY C	CALIFORNIA 50	1
Check One: X Initial Amendment (Explain) _		17 JUN 16	AN II: 50	
		CITY OF COS	A MESA	
1. Candidate Information:		WY		
NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	E-MAIL (optional)	
Mansoor, Allan	(714) 540-2295	()		
STREET ADDRESS	CITY	STATE	ZIP CODE	
2973 Harbor Blvd #571	Costa Mesa	CA	92626	
OFFICE SOUGHT (POSITION TITLE) AGENCY NAME		DISTRICT NUMBE	R. if applicable. NON-PARTISAN	
Mayor City of Costa	Mesa		PARTY:	
OFFICE JURISDICTION State (Complete Part 2.)				
City County Muin-County:	(Name of Multi County Jurisdiction)		ole 18 (18 Election)	
	_ Speciallrunoff election			
(Check one box) I accept the voluntary expenditure ceiling for the election s	stated above.			
I do not accept the voluntary expenditure ceiling for the el	ection stated above.			
Amendment: I did not exceed the expenditure ceiling in the prima the general or special run-off election.		_/ and I acce	pt the voluntary expenditure ceiling for	
	The state of the s			
(Mark if applicable)				
On, I contributed personal funds in exce	ss of the expenditure ceiling for the	ne election stated above		
3. Verification:	(A)A A	9		Austriana
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
Executed on	Signature	ndidate)		