

**Officeholder and Candidate
Campaign Statement –
Short Form**

(Government Code Section 84206)

Type or print in ink.

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)

RECEIVED	SHORT FORM
	Date Stamp: JUL 10 2014 CALIFORNIA FORM 470 <small>or Official Use Only</small>
CITY CLERK'S OFFICE CITY OF BENICIA	

1. Statement Covers Calendar Year 20 14

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE			
Kenneth Charles Paulk			
STREET ADDRESS			
CITY	STATE	ZIP CODE	
Benicia	Ca	94510-0908	
AREA CODE/DAYTIME PHONE NUMBER		OPTIONAL: FAX / E-MAIL ADDRESS	

3. Office Sought or Held

OFFICE SOUGHT OR HELD	
Treasure	
JURISDICTION (LOCATION)	DISTRICT NUMBER (IF APPLICABLE)
Benicia California	

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER
None		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$1,000 and that I will spend less than \$1,000 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.

Executed on 07/10/2014
DATE

By [Signature]
SIGNATURE OF OFFICEHOLDER OR CANDIDATE