

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

(Government Code Section 84206)

Type or print in ink.

SHORT FORM

Date Stamp
RECEIVED

FEB 28 2022

CITY MANAGERS OFFICE

CALIFORNIA FORM 470

For Official Use Only

Date of election if applicable:
(Month, Day, Year)

11/3/2020

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 21 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Michael E. Silva

STREET ADDRESS

[REDACTED]

CITY

STATE

ZIP CODE

[REDACTED]

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX/E-MAIL ADDRESS

[REDACTED]

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Vacaville City Councilmember, District 3

JURISDICTION (LOCATION)

City of Vacaville

DISTRICT NUMBER
(IF APPLICABLE)

3

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
N/A - FPPC Account Closed in 2021		

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 February 22, 2022
DATE

By 
SIGNATURE OF OFFICEHOLDER OR CANDIDATE