CANDIDATE'S STATEMENT OF QUALIFICATIONS

See the Candidate Filing Guide and Elections Code § 13307, 13308, 13311
for Candidate's Statement guidelines and requirements.

Jurisdiction Name (ALL CAPS)	CITY OF EL CAJON
Office Title: (Title Case)	El Cajon City Council
Candidate Name: (ALL CAPS)	PHIL ORTIZ

Age: (Optional)		Gender (M or F):	M

Occupation[1]:	El Cajon City Councilmember
Election Date:	November 5, 2024

[1] The occupation to appear on the Candidate's Statement is not restricted by the California Elections Code. It does not have to match the occupation on the ballot. It can be more descriptive and have more than three words.

Use "Block Paragraphs, Single Space" format. Word count starts here:

As your current City Councilmember, I have worked hard to deliver results for El Cajon. Since being elected I have:
-Ensured a balanced budget
-Kept Police and Fire Departments staffed to their highest levels in years, preventing delayed response times
-Partnered with Police Department to reduce speeding and street racing to make our streets safer
-Increased illegal homeless encampment clean-ups and ensured drug/alcohol free shelters
-Championed effort to Repeal Prop 47 (Prop 47 allows criminals to steal $950 from stores with little consequences)
-Improved the City of El Cajon App usage to ensure residents have a voice (Residents can submit any issues via My El Cajon App on their phone)
-Reduced City of El Cajon's pension debt by approximately $70 million dollars
-Wrote the Code of Conduct ethics law for elected/appointed officials in El Cajon to hold officials accountable
-As a small business owner, I led the effort to raise $250,000 for local small business after 2020 riots
-Cast new vision for Parkway Plaza through revitalization plan
-Continuing efforts to clean up problem Motels and bad acting Motel owners within the City

I understand I am responsible for the cost of this statement and that I may be billed or refunded the difference in cost based on the final registration for my jurisdiction.	Estimated cost of the statement (due at time of filing): Councilmember: D2 $1,500; D3 $1,600; D4 $1,500 *(Make checks payable to City of El Cajon)*

Please <u>sign</u> <u>one</u> of the following statements:	I **DO NOT** wish to file a statement: _____ Candidate's Signature Date
	I **DO** wish to file a statement: (Payment of estimated statement cost is due at time of filing.) Candidate's Signature 7/30/2024 Date