

**Candidate Intention Statement**

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CITY OF SIMI VALLEY  
Date Stamp  
2018 JUL 17 PM 3:23  
OFFICE OF CITY CLERK  
BY *[Signature]*

**CALIFORNIA FORM 501**  
For Official Use Only

Check One:  Initial  Amendment (Explain) \_\_\_\_\_

**1. Candidate Information:**

NAME OF CANDIDATE (Last, First, Middle Initial) GRAY, DAWN DAYTIME TELEPHONE NUMBER \_\_\_\_\_ FAX NUMBER (optional) \_\_\_\_\_ E-MAIL (optional) \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY Simi Valley STATE CA ZIP CODE 93065

OFFICE SOUGHT (POSITION TITLE) Mayor AGENCY NAME City of Simi Valley DISTRICT NUMBER, if applicable. N/A  NON-PARTISAN PARTY: \_\_\_\_\_

OFFICE JURISDICTION  
 State (Complete Part 2.)  
 City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) Year of Election 2018

**2. State Candidate Expenditure Limit Statement:**

*(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)*

\_\_\_\_\_  
(Year of Election) **Primary/general election**      \_\_\_\_\_  
(Year of Election) **Special/runoff election**

*(Check one box)*

- I accept the voluntary expenditure ceiling for the election stated above.
- I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

I did not exceed the expenditure ceiling in the primary or special election held on: \_\_\_\_/\_\_\_\_/\_\_\_\_ and I accept the voluntary expenditure ceiling for the general or special run-off election.

*(Mark if applicable)*

On \_\_\_\_/\_\_\_\_/\_\_\_\_, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

**3. Verification:**

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7/16/2018  
(month, day, year)

Signature *[Signature]*  
(Candidate)