

**Candidate Intention Statement**

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

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**1. Candidate Information:**

NAME OF CANDIDATE (Last, First Middle Initial) Mashburn, Keith		DAYTIME TELEPHONE NUMBER _____	FAX NUMBER (optional) ( )	EMAIL (optional) _____
STREET ADDRESS _____		CITY Simi Valley	STATE Ca	ZIP CODE 93063
OFFICE SOUGHT (POSITION TITLE) Simi Valley Mayor	AGENCY NAME _____	DISTRICT NUMBER, if applicable. _____	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE	
OFFICE JURISDICTION		PARTY PREFERENCE:		
<input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ (Name of Multi-County Jurisdiction)		(Check one box, if applicable.) <input type="checkbox"/> PRIMARY / GENERAL <input type="checkbox"/> SPECIAL / RUNOFF		
		2020 (Year of Election)		

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

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

(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.

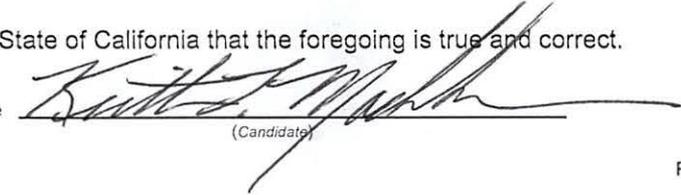
(Mark if applicable)

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 7-9-20  
(month, day, year)

Signature   
(Candidate)