

We ask for your support for Measure J and support for our public safety officers and city. We are proud of Dixon—a city with the lowest sales tax rate in California, where families feel safe, and services are reliable. But now, our ability to maintain what makes Dixon special is at risk.

While we have kept taxes low, the world around us has changed. It is getting harder to maintain the essential services that make Dixon a great place to live. Our police officers and firefighters – the brave men and women who put their lives on the line to protect us – are being taken away by neighboring cities that can offer them better pay, facilities and equipment.

This isn't just about numbers on a budget. It's about the safety of our families, the security of our neighborhoods, and the future of our children. If we don't act, we risk losing the very people who keep our community safe. Measure J is about making sure that doesn't happen.

By adding a one cent tax to every dollar spent in Dixon, we can ensure that Dixon has the resources it needs to attract and retain the best public safety officers and maintain the essential services we all depend on. Every single penny generated by this measure will stay in Dixon and can't be taken away by the politicians in Sacramento.

More than half of the revenue generated by Measure J will be paid by people who do not live in Dixon.

We are asking you to join our public safety officers and local businesses leaders in support of Measure J. Let's stand up for our city, for our safety, and for our future.

Let's keep Dixon dollars in Dixon and ensure a strong and vibrant city for generations to come.

# SIGNATURE STATEMENT PAGE ONE

(Elections Code Section 9065, 9600)

All arguments/rebuttal arguments concerning measures shall be accompanied by this form to be signed by each author(s). Author(s) names and titles listed will be listed and printed in the Voter Information Guide in the order provided below and will appear as indicated below.

The undersigned author(s) of the:

ARGUMENT IN FAVOR

300 WORDS

ARGUMENT AGAINST

300 WORDS

REBUTTAL TO ARGUMENT IN FAVOR

250 WORDS

REBUTTAL TO ARGUMENT AGAINST

250 WORDS

Ballot measure letter J at the General Municipal Election  
Name of election

Election for the CITY OF DIXON  
Jurisdiction - name of district

to be held on November 5, 2024 hereby state that such argument  
Election Date

is true and correct to the best of his/her/their knowledge and belief.

1) [Redacted Signature] [Redacted Address] 2024  
Signature of individual voter eligible to vote Residence address (for verification purposes) Date

Print Name Steven Bird  
Are you signing on behalf of association or governing board? YES or NO

MAYOR  
If yes complete page 2 Please circle one A

2) [Redacted Signature] [Redacted Address] 2024  
Signature of individual voter eligible to vote Residence address (for verification purposes) Date

Print Name Jim Ernest  
Are you signing on behalf of association or governing board? YES or NO

COUNCIL MEMBER  
If yes complete page 2 Please circle one A

3) [Redacted Signature] [Redacted Address] 2024  
Signature of individual voter eligible to vote Residence address (for verification purposes) Date

Print Name RICHARD STEVENS  
Are you signing on behalf of association or governing board? YES or NO

DPOA PRESIDENT  
If yes complete page 2 Please circle one A

4) [Redacted Signature] [Redacted Address] 2024  
Signature of individual voter eligible to vote Residence address (for verification purposes) Date

Print Name Andrew Tomelloso  
Are you signing on behalf of association or governing board? YES or NO

DPFA President  
If yes complete page 2 Please circle one A

5) [Redacted Signature] [Redacted Address] 20  
Signature of individual voter eligible to vote Residence address (for verification purposes) Date

Print Name \_\_\_\_\_  
Are you signing on behalf of association or governing board? YES or NO

(Optional) Title \_\_\_\_\_  
If yes complete page 2 Please circle one A

IF SIGNING ON BEHALF OF A GOVERNING BOARD OR BONA FIDE ASSOCIATION OF CITIZENS YOU MUST COMPLETE PAGE 2

CONTACT PERSON NAME & PHONE # Steven Bird 707 685-5217

# SIGNATURE STATEMENT PAGE TWO

(Elections Code Section 9065, 9600)

## CHECK ONE OF THE FOLLOWING & RECORD LETTER OF MEASURE

- Argument in favor of measure       Rebuttal to argument in favor of measure  
 Argument against measure       Rebuttal to argument against measure

## ARGUMENTS and/or REBUTTALS FILED BY (Check any of the following that apply:

**Board of Supervisors or Governing Board**

Contact Person's Printed Name \_\_\_\_\_  
Contact Person's Signature \_\_\_\_\_  
Title \_\_\_\_\_  
Phone # \_\_\_\_\_ Fax# \_\_\_\_\_ E-mail \_\_\_\_\_

The following information is submitted by the filers(s) to establish that the organization or group is a Bona Fide Association of Citizens:

**Bona Fide Association of Citizens or Filers of Special District Initiative**

Name of Association: \_\_\_\_\_  
Principal Officer's Printed Name \_\_\_\_\_  
Principal Officer's Signature \_\_\_\_\_  
Title \_\_\_\_\_  
Phone# \_\_\_\_\_ Fax# \_\_\_\_\_ E-mail \_\_\_\_\_

- A Form 410 Statement of Organization – establishing the group or organization as a Primarily Formed Ballot Measure committee to support or oppose Measure \_\_\_\_\_ was filed on \_\_\_\_\_ Committee I.D.# \_\_\_\_\_  
(The Form 410 must be filed within 10 days of the date the committee receives \$1000.00 in contributions)

- The organization meets on a regular basis. Meetings are held at Dixon Police Officer's Association, 1285 Stratford Ave Suite G, Dixon CA 95620  
at the following schedule: BOARD Mtg every 2 months, Regular Mtg every 3-4 months

- Other information that would support the claim that the group or organization is a Bona Fide Association, rather than a group of individuals who support or oppose Measure \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# SIGNATURE STATEMENT PAGE TWO

(Elections Code Section 9065, 9600)

## CHECK ONE OF THE FOLLOWING & RECORD LETTER OF MEASURE

- Argument in favor of measure       Rebuttal to argument in favor of measure  
 Argument against measure       Rebuttal to argument against measure

## ARGUMENTS and/or REBUTTALS FILED BY (Check any of the following that apply):

- Board of Supervisors or Governing Board**  
Contact Person's Printed Name \_\_\_\_\_  
Contact Person's Signature \_\_\_\_\_  
Title \_\_\_\_\_  
Phone # \_\_\_\_\_ Fax# \_\_\_\_\_ E-mail \_\_\_\_\_

The following information is submitted by the filer(s) to establish that the organization or group is a Bona Fide Association of Citizens:

- Bona Fide Association of Citizens or Filers of Special District Initiative**  
Name of Association: \_\_\_\_\_  
Principal Officer's Printed Name \_\_\_\_\_  
Principal Officer's Signature \_\_\_\_\_  
Title \_\_\_\_\_  
Phone# \_\_\_\_\_ Fax# \_\_\_\_\_ E-mail \_\_\_\_\_
- A Form 410 Statement of Organization – establishing the group or organization as a Primarily Formed Ballot Measure committee to support or oppose Measure \_\_\_\_\_ was filed on \_\_\_\_\_ Committee I.D.# \_\_\_\_\_  
(The Form 410 must be filed within 10 days of the date the committee receives \$1000.00 in contributions)
- The organization meets on a regular basis. Meetings are held at Dixon Professional  
firefighters Association, 205 Ford Way Dixon CA 95620  
at the following schedule Bi-Monthly
- Other information that would support the claim that the group or organization is a Bona Fide Association, rather than a group of individuals who support or oppose Measure \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# AUTHORIZATION FOR ANOTHER PERSON(S) TO SIGN REBUTTAL ARGUMENT

TO BE COMPLETED BY INITIAL ARGUMENT SIGNERS ONLY IF REBUTTAL ARGUMENT IS TO BE SIGNED BY DIFFERENT AUTHORS

The undersigned author(s) of the argument

In Favor of

Against

Measure \_\_\_\_\_ at the \_\_\_\_\_ election to be  
Letter Name of election

Held on \_\_\_\_\_ authorize(s) the following individual(s) to sign  
Date of election

The rebuttal argument in his/her/their place:

One or more people who signed the argument may be replaced with different people to sign the rebuttal argument)

1) \_\_\_\_\_ to sign instead of \_\_\_\_\_  
PRINT NAME OF REBUTTAL SIGNER SIGNATURE OF ARGUMENT SIGNER DATE

2) \_\_\_\_\_ to sign instead of \_\_\_\_\_  
PRINT NAME OF REBUTTAL SIGNER SIGNATURE OF ARGUMENT SIGNER DATE

3) \_\_\_\_\_ to sign instead of \_\_\_\_\_  
PRINT NAME OF REBUTTAL SIGNER SIGNATURE OF ARGUMENT SIGNER DATE

4) \_\_\_\_\_ to sign instead of \_\_\_\_\_  
PRINT NAME OF REBUTTAL SIGNER SIGNATURE OF ARGUMENT SIGNER DATE

5) \_\_\_\_\_ to sign instead of \_\_\_\_\_  
PRINT NAME OF REBUTTAL SIGNER SIGNATURE OF ARGUMENT SIGNER DATE

Attach this form to the two page "Signature Statement" submitted with the rebuttal argument