

County of Mendocino

APPLICATION FOR DECLARATION OF CANDIDACY

November 3, 2020, Statewide General Election

Candidate
Name

1

My name is _____
First Middle/Initial (optional) Last

Name of Office Seeking _____

District/Trustee Area (if any) _____

Full Term or Short Term _____

Name as it is to appear on the ballot _____

Ballot Designation _____
PROFESSION; VOCATION; OR OCCUPATION - (from Ballot Designation Worksheet)

Addresses,
Telephone
Number, Fax,
and Email

2

a. My residence address is:

Address (number and street): _____ Apt or Unit #: _____

City: _____ State: _____ Zip Code: _____

My mailing address is (if different than Residence): _____

City: _____ State: _____ Zip Code: _____

b. My contact information is (please check the appropriate box to indicate which address you wish to be used for publishing purposes):

Publish ☐ Evening: () _____

Publish ☐ Day: () _____

Publish ☐ FAX: () _____

Publish ☐ Email: () _____

X

_____/_____/_____
Signature of Candidate Date

OFFICE USE ONLY:

- | | | |
|---|-----------|-----------------------------------|
| 1. Is he/she a registered voter? | Yes _____ | No _____ |
| 2. Residential address the same as registered? | Yes _____ | No _____ - if no must re-register |
| 3. District/Trustee area eligibility OK? | Yes _____ | No _____ |
| 4. Party affiliation OK? (Voter Nom Offices Only) | Yes _____ | No _____ |