CITY OF MORENO VALLEY
CANDIDATE'S PERSONAL INFORMATION FORM

This optional form is to be completed by the Candidate. The biographical information will be provided to the public and to the news media upon request.

Name: _____

Address: _____

_____

Occupation: _____

Date of Birth: _____ Birthplace: _____

Name of Spouse: _____ Names and Ages of Children: _____

_____ _____

_____ _____

Years of City Residency: _____ Formerly of: _____

Education and Training: _____

_____

_____

Service Record:

_____

_____

Membership and Offices held in Civic, Religious, Fraternal or Technical Associations:

_____

_____

Hobbies: _____

Campaign Manager/Headquarters, if any: _____

Home Phone No.: _____ Business Phone No.: _____

Do you object to being contacted at either number? _____

_____ _____
Signature Date