APPLICATION FOR NOMINATION PAPERS -- CITIES

ELECTION DATE: **November 5, 2024**

TO BE COMPLETED BY CANDIDATE

_____ _____
NAME AS REGISTERED **DATE**

_____
RESIDENCE ADDRESS INCLUDING CITY AND ZIP

_____
MAILING ADDRESS IF DIFFERENT FROM RESIDENCE

E-Mail Address: _____ **Fax:** ( ) _____

TELEPHONE NUMBER(S): Day ( ) _____ **Eve.** ( ) _____

☐ Full Term ☐ Short Term

_____ _____
OFFICE SOUGHT **DISTRICT/WARD (if applicable)**

OFFICE USE

Registration checked by: _____ (951) 486-7200 or 800-773-8683
(CLERK AT ROV OFFICE)

Precinct Number: _____ Date of Registration: _____

Material issued by: _____
(CITY CLERK/DEPUTY)

- ☐ Official Filing Form
- ☐ Ballot Designation Worksheet
- ☐ Candidate's Statement Form
- ☐ Code of Fair Campaign Practices
- ☐ Statement of Economic Interests/Manual
- ☐ Resolution concerning Candidate Statement
- ☐ Campaign Disclosure Forms

TO BE READ AND SIGNED BY CANDIDATE

To the best of my knowledge, I meet the eligibility requirements for the office I seek. At my request the nomination documents listed above have been issued to me and I am aware that they must be filed with the City Clerk, during normal business hours no later than **4:30 PM, August 9, 2024**

STATE LAW REQUIRES CANDIDATE INFORMATION BE A MATTER OF PUBLIC RECORD.
Please indicate if you give permission for your home address and telephone number to be listed on the Internet.

☐ Yes
☐ No (If NO, you may provide a mailing address): _____

_____ _____
SIGNATURE OF CANDIDATE (OR AGENT) **DATE OF SIGNING**

NOTE: A Spanish version of the required forms is available upon request.
La versión en español de las formas requeridas están disponibles al solicitarlas.