



# COUNTY OF SACRAMENTO

## CANDIDATE FILING OVERVIEW

**NOVEMBER 2024  
PRESIDENTIAL GENERAL ELECTION**



# NOTICE TO CANDIDATES

This overview is intended to provide general information for candidates and committees and does not have the force or effect of the law, regulation or rule. It is intended to help you understand your responsibilities and the information is subject to change.

It is distributed with the understanding that any prospective candidate obtain legal advice to assist in complying with applicable California Laws, including California Elections Code and California Government Code.





# RESOURCES AVAILABLE ONLINE

[www.elections.sacounty.gov](http://www.elections.sacounty.gov)

- CANDIDATE FILING APPOINTMENTS
- ELECTION CALENDAR
- OFFICES UP FOR ELECTION
- CANDIDATE GUIDE
- LETTER OF AUTHORIZATION
- BALLOT DESIGNATION WORKSHEET
- CODE OF FAIR CAMPAIGN PRACTICES
- CANDIDATE STATEMENT WORKSHEET



# IMPORTANT DATES

- 07/15 – 08/09 NOMINATION PERIOD (All original, signed documents must be received in our office by 5 p.m.)
- 07/30 LAST DAY TO CHANGE BALLOT DESIGNATION \* Candidates may request a change in ballot designation that differs from the one used in the **primary election**; must be done in writing
- 08/09 LAST DAY TO WITHDRAW CANDIDACY \*No candidate who has filed a Declaration of Candidacy for the General Election may withdraw as a candidate, after 5 p.m. on this date
- 08/12\*– 08/14 NOMINATION EXTENSION PERIOD \* for offices in which the incumbent fails to file \* Date falls on a weekend, it moves to the next business day
- 09/09 – 10/22 WRITE IN PERIOD \* Excludes runoff contests





# CONTESTS ON BALLOT

## VOTER-NOMINATED OFFICES

- ✓ Top two candidates from the Primary Election will runoff in the General Election

## LOCAL OFFICES

- ✓ Schools and Special Districts – offices where more candidates file than the number of seats available
- ✓ There are no filing fees for schools and special districts
- ✓ County offices where no candidate obtained a majority vote in the Primary Election

## CITY OFFICES

- ✓ Contact the city clerk for more information
- ✓ Filing fees – prospective candidates should contact the city clerk



# REDISTRICTING

Every ten years districts are redrawn using U.S Census data. Redistricting is the process of drawing electoral district maps which, then, determine what neighborhoods and communities are grouped together. For most elected offices voters in each district elect representatives from those districts. Incumbents and candidates may be required to live in their district and, due to boundary line changes, may no longer reside in those districts.

## **POSSIBLE CHANGES TO HOW CANDIDATES ARE ELECTED**

Due to transitioning some districts have changed to qualified and elected by district/area. Please refer to the Positions Up for Election on our website.

<https://elections.saccounty.gov/ElectionInformation/Documents/2024-November-General/Positions-Up-Nov-2024.pdf>

Candidates or Incumbents who have questions regarding which districts they reside in may contact our office at (916) 875-6276.

**“My Voter Portal” is now available on our website at:**

<https://myvoterportal.saccounty.gov/LookupVoter>





# TOP TWO CONTESTS

All candidates for voter-nominated offices are listed on the primary ballot and only the top two candidates that receive the highest votes in the primary election – regardless of party preference - move on to the general election.

Candidates running for a voter-nominated office cannot run in the general election without having been one of the top two vote-getters in the primary election.



# GETTING STARTED

# WHAT'S IN YOUR PACKET?





# CANDIDATE FILING CHECKLIST


The following is a list of candidate nomination documents that may be included in your packet and can be found on our website at [www.election.saccounty.gov](http://www.election.saccounty.gov). Descriptions of each are found on the following pages.

- Letter of Authorization (optional)
- Candidate Receipt and Acknowledgment Form (required)
- Nomination Petitions (required for some offices)
- Ballot Designation Worksheet (optional)
- Code of Fair Campaign Practices (optional)
- Statement of Economic Interests – Form 700 (required)
- Candidate Statement Coversheet (required)
- Candidate Statement Form and Fee (optional)
- Declaration of Candidacy (required)



# LETTER OF AUTHORIZATION

- ✓ A candidate may designate a specific person to obtain and/or file nomination papers and/or a Declaration of Candidacy form on behalf of the candidate.
- ✓ A Letter of Authorization form can be found on our website and must be properly completed and signed prior to either obtaining or filing the nomination papers for a candidate.
- ✓ The filed Letter of Authorization shall be retained by the elections official. (Elections Code § 8028)

 COUNTY OF SACRAMENTO  
**VOTER REGISTRATION AND ELECTIONS**  
Letter of Authorization

To obtain and/or file candidate nomination documents

I, \_\_\_\_\_, candidate for the office of \_\_\_\_\_

\_\_\_\_\_ hereby authorize \_\_\_\_\_ to obtain and/or file the following nomination documents on my behalf.

**Check the applicable box(es):**

<input type="checkbox"/> Obtain Nomination Documents	<input type="checkbox"/> Obtain Declaration of Candidacy
<input type="checkbox"/> File Nomination Documents	<input type="checkbox"/> File Declaration of Candidacy
<input type="checkbox"/> File Candidates Statement	

**Check one:**

Yes, I authorize the person written above to make any changes and/or corrections to my nomination documents.

No, I do not authorize the person written above to make any changes and/or corrections to my nomination documents.

**Complete the following:**

Current residence address: \_\_\_\_\_  
Street Address City State Zip Code

Mailing address (if different from above): \_\_\_\_\_  
Street Address or PO Box City State Zip Code

Telephone Number(s): \_\_\_\_\_ and/or \_\_\_\_\_  
Daytime Telephone Evening Telephone

Internet Address: \_\_\_\_\_ and/or \_\_\_\_\_  
Email Address Website Address

I am aware that said documents and the Declaration of Candidacy, if applicable, must be properly executed and filed at the Sacramento County Elections office no later than the last day of the nomination period. EC §§ 8028 (b), 8064, 8020 (d)

Printed Name \_\_\_\_\_

Signature of Candidate \_\_\_\_\_ Date \_\_\_\_\_

7000 65<sup>th</sup> Street, Suite A, Sacramento, CA 95823  
P (916) 875-6276 F (916) 854-9567 email [voters-campaignservices@csacounty.gov](mailto:voters-campaignservices@csacounty.gov)  
Web [www.elections.sacounty.gov](http://www.elections.sacounty.gov)





# CANDIDATE RECEIPT AND ACKNOWLEDGMENT FORM

- ▶ Completed by both the candidate and the elections official.
- ▶ Serves as an acknowledgment of what was issued and received.
- ▶ Must be signed in the presence of an elections official.

The image shows three overlapping forms for the County of Sacramento Voter Registration and Elections. The forms are titled 'COUNTY', 'FEDERAL / STATE', and 'SCHOOLS'. Each form includes sections for candidate information (name, address, phone, email), filing fees (amount paid, date filed), and a table for tracking nomination forms issued and received. The forms also require signatures from both the candidate and the elections official, with dates and times specified for when the forms must be signed.

All candidates who are issued nomination papers will be required to acknowledge that all original, signed nomination documents are due in our office on August 9, 2024, by 5 pm.

It is your responsibility as a candidate to ensure that you have met the requirements and filed all nomination documents by the deadline.



# NOMINATION PETITIONS

## The Following Offices Require Nomination Signatures:

- ✓ American River Flood Control District
- ✓ Florin Resource Conservation District (RCD)
- ✓ SMUD - Sacramento Municipal Utility District
- ✓ \*\* City Offices- Contact City Clerk

**California Secretary of State  
NOMINATION PAPER**  
Election Date and Title (Elections Code §§ 100, 104, 8041, 8062, 8068, 8069, 8146; Code of Civil Procedure § 2015.5)

For County Elections and Secretary of State Official USE ONLY

Official Filing Form

County Elections Official

By: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

Filed In County of: \_\_\_\_\_

County Elections Official

By: \_\_\_\_\_  
Date Received: \_\_\_\_\_

Secretary of State Official

I, the undersigned signer for \_\_\_\_\_ for nomination to the \_\_\_\_\_

Candidate Name, Office, and Signer's County of Residence

office of **Office Title**, to be voted for at the **Election Title**, hereby assert as follows:

I am a resident of \_\_\_\_\_ County and am registered to vote at the address shown on this paper. I am not at this time a signer of any other nomination paper of any other candidate for the above-named office.

My residence is correctly set forth after my signature hereto:

PRECINCT <small>(to be entered by Elections Official)</small>	NAME	RESIDENCE (As Registered - No P.O. BOX)	VERIFICATION <small>(to be entered by Elections Official)</small>
Print: 1	Signature: _____	Residence Address ONLY: City or Town: _____	
Print: 2	Signature: _____	Residence Address ONLY: City or Town: _____	
Print: 3	Signature: _____	Residence Address ONLY: City or Town: _____	
Print: 4	Signature: _____	Residence Address ONLY: City or Town: _____	
Print: 5	Signature: _____	Residence Address ONLY: City or Town: _____	
Print: 6	Signature: _____	Residence Address ONLY: City or Town: _____	
Print: 7	Signature: _____	Residence Address ONLY: City or Town: _____	
Print: 8	Signature: _____	Residence Address ONLY: City or Town: _____	

Please Complete Affidavit of Circulator on Reverse Side

## Requirement for signers:

- ✓ Signer must be a registered voter within the district, division or ward
- ✓ Florin RCD must be landowners in the district.
- ✓ Signer must print physical address only
- ✓ Signer must print and sign their own name





# NOMINATION PETITIONS AFFIDAVIT OF THE CIRCULATOR

## INSTRUCTIONS

Candidates may circulate their own petitions.

Anyone that circulates a petition must be 18 years of age or older.

\*Anyone that acts as a Circulator for a prospective candidate seeking election for SMUD Board of Directors must also be registered in the ward.

Circulator will print their name, address and dates that the petition was circulated.

Circulator's signature is required.

PRECINCT <small>(to be entered by Elections Official)</small>	NAME	RESIDENCE (As Registered - No P.O. BOX)	VERIFICATION <small>(to be entered by Elections Official)</small>
	Print: 9	Residence Address ONLY:	
	Signature:	City or Town:	
	Print: 10	Residence Address ONLY:	
	Signature:	City or Town:	

I, \_\_\_\_\_, solemnly swear (or affirm) all of the following:

**Circulator must sign and date this section of the Nomination Petition.**

1. That I am \_\_\_\_\_ years of age.

2. That my residence address, including street and number, is \_\_\_\_\_  
[If no street or number exists, a designation of my residence adequate to readily ascertain its location is: \_\_\_\_\_]

3. That the signatures on this section of the nomination paper were obtained between \_\_\_\_\_, 20\_\_\_\_  
Month and Day  
and \_\_\_\_\_, 20\_\_\_\_, that I circulated this section and witnessed the signatures on this section of the nomination paper being written, and that, to the best of my information and belief, each signature is the genuine signature of the person whose name it purports to be.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ X \_\_\_\_\_  
Signature of Circulator

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truth, accuracy, or validity of that document.

State of California  
County of \_\_\_\_\_

Subscribed and sworn to (or affirmed) before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_  
\_\_\_\_\_, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

(Notary Public Seal) Signature of Notary Public (or other officer) \_\_\_\_\_

Examined and certified by me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
County Elections Official \_\_\_\_\_

**(TO BE ENTERED BY ELECTIONS OFFICIAL AFTER VERIFICATION)**  
Number of Valid Signatures on this Section:  
Date:  
By:

**WARNING:** Every person acting on behalf of a candidate is guilty of a misdemeanor who deliberately fails to file at the proper time and in the proper place any nomination paper in the person's possession that is entitled to be filed under the provisions of the Elections Code. (Elections Code § 18202.)

The bottom portion of the form is reserved for the Elections Official.





# DECLARATION OF CANDIDACY - FRONT

## INSTRUCTIONS

### Section 1:

Candidate will print their name and office sought.

### Section 2:

Candidate will print their name for use on the ballot as well as the desired ballot designation.


A check box is provided for candidates that wish to provide a character-based name.

### Section 3:

The residence address field is required.

Candidate must provide contact information that will be published in our Candidate Report located on our website.

**NOTE:** This form will be made available only in our office.

 **County of Sacramento**  
**DECLARATION OF CANDIDACY**  
**Nonpartisan Office – For Use in Local Elections**  
 November 5, 2024, Presidential General Election (Elections Code §§ 20, 200, 10510, 10511, 10512, 10513, 10502, 13107)

**For Elections Officials USE ONLY**

Official Filing Form Filed in: \_\_\_\_\_  
 County Elections Official By: \_\_\_\_\_ Date Issued: \_\_\_\_\_  
 County Elections Official By: \_\_\_\_\_ Date Received: \_\_\_\_\_  
 County Elections Official

**Candidate Name, and Office**

1 I hereby declare myself a candidate for the nomination/election to the office of \_\_\_\_\_ to be voted for at the General Election to be held on November 5, 2024, and declare the following to be true:  
 My name is \_\_\_\_\_  
 First Middle/Initial (optional) Last  
 I am a registered voter; if elected, I will qualify and serve to the best of my ability, and I request my name be placed on the official ballots of the district, for the election to be held on the 5th day of November, 2024.

**Ballot Information Name and ballot designation to appear on the ballot**

2 **IMPORTANT NOTE:** A ballot designation is optional. If one is requested, a completed **BALLOT DESIGNATION WORKSHEET** must be submitted. If no ballot designation is requested, write "NONE" and initial in the box. (Elections Code §§ 43707, 13107.3)  
 I request my name and ballot designation to appear on the ballot as follows:  
 First Middle/Initial (optional) Last  
 Print Your Name for Use on the Ballot  
 Candidate initials box if NO ballot designation is preferred.  
 Print Ballot Designation Requested  
 \_\_\_\_\_ I have a character-based name I wish to use instead of a phonetic transliteration. (You must complete Character-Based Name Form.)

**IMPORTANT NOTE:** The County Elections Official will publish your name, proposed ballot designation, and one of the addresses below in the Candidate Report available on our website.  
 † Please check the appropriate boxes below to indicate the information you wish to be used for publishing purposes.  
 † If NO BOX IS CHECKED, the first address listed and provided below will be published.

**Addresses, Telephone, Website and Email**

3 **Publish**  → Mailing Address: \_\_\_\_\_ Apt. or Unit # \_\_\_\_\_  
 City/State/Zip Code: \_\_\_\_\_  
**Publish**  → Residence Address (Required): \_\_\_\_\_ Apt. or Unit # \_\_\_\_\_  
 City/State/Zip Code: \_\_\_\_\_  
**Publish**  → Business Address: \_\_\_\_\_ Apt. or Unit # \_\_\_\_\_  
 City/State/Zip Code: \_\_\_\_\_  
**Publish**  → Telephone (Day): \_\_\_\_\_  
**Publish**  → Telephone (Evening): \_\_\_\_\_  
**Publish**  → Website: \_\_\_\_\_  
**Publish**  → Email: \_\_\_\_\_

**IMPORTANT: Reverse Side of Page Must Be Completed**





# DECLARATION OF CANDIDACY - BACK

## Section 4:

If you are an incumbent, you must place the name of the office on this line.

All candidates are required to sign in the red box.

## Section 5:

The Oath of Office will be administered by the Elections Official in the Elections Office and signed by the candidate.

## Section 6:

This section must be completed by an Elections Official.

If the Oath of Office is administered by a Notary Public, the Notary will sign this section. Notary must then place their seal on the form.

Qualifications	4	I meet the statutory and constitutional qualifications for this office (including, but not limited to, citizenship and residency). I am at present an incumbent of the following public office (if any): _____ I have not been convicted of a felony involving accepting or giving, or offering to give, any bribe, the embezzlement of public money, extortion or theft of public money, perjury, or conspiracy to commit any of these crimes. If nominated/elected, I will accept the nomination/election and not withdraw.
		X _____ Signature of Candidate
Oath of Office	5	I, _____ do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.
		X _____ Signature of Candidate
Notary Public or Other Officer	6	A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. State of California County of _____ Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____ by _____, _____ proves to me on the basis of satisfactory evidence to be the person(s) who appeared before me.  _____ (Notary Public Seal) Signature of Notary Public (or other officer)  Examined and certified by me this _____ day of _____, 20____. Elections Official

**WARNING:** Every person acting on behalf of a candidate is guilty of a misdemeanor who deliberately fails to file at the proper time and in the proper place any declaration of candidacy in the person's possession that is entitled to be filed under the provisions of the Elections Code. (Elections Code § 18202.)



# BALLOT DESIGNATION WORKSHEET

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

## WHAT IS IT?

The ballot designation is the word or group of words that will appear on the ballot under the candidate's name designating the principal profession, vocation, or occupation of the candidate.





# BALLOT DESIGNATION WORKSHEET

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

## WHAT CAN I USE AS MY BALLOT DESIGNATION?

- 1. Elective Office:** Words that designate the elective office which the candidate holds at the time of filing the nomination documents.
- 2. Incumbent:** The word “incumbent” may be used if the candidate is a candidate for the same office that he or she holds at the time of filing the nomination papers.
  - A candidate shall not use the word “incumbent” or “appointed incumbent” if the candidate was elected or appointed to their office at an at-large election and the district has changed to district-based election. Elections Code § 13107(2) AB 1762 Effective January 1, 2024
- 3. 3-word Profession/Vocation/Occupation:** No more than three words designating either **the current principal professions, vocations, or occupations of the candidate**. If more than one profession, vocation or occupation is listed, it shall be separated by a slash (“/”).
- 4. Appointed Incumbent:** The phrase “Appointed Incumbent” may be used if the candidate holds an office by virtue of appointment, and the candidate is running for the same office.



# BALLOT DESIGNATION WORKSHEET

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

## DO NOT LEAVE ANY RESPONSES BLANK

If the information requested does not pertain, please mark the response as N/A.

Complete the gender option which will be used for translation purposes only.

The ballot designation is limited to three words and must be your current profession, vocation, or occupation and should be added to the first line of the Proposed Ballot Designation section.

If you are an Incumbent, you may use your official district title which will be counted as one word.

California Secretary of State  
BALLOT DESIGNATION WORKSHEET  
November 5, 2024, General Election (Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

This entire form must be completed, or it will not be accepted, and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write "N/A" in the space provided; otherwise the information MUST be provided. UPON FILING, THIS WORKSHEET WILL BE A PUBLIC DOCUMENT.

Candidate Information 1  
Candidate Name: John Smith  
Office: Excelsior Water District Email: Johnsmith@aol.com  
Home Address: 1234 Happy Lane, Sacramento, CA 95823  
Mailing Address: PO Box 1234, Sacramento, CA 95823  
Business Address: N/A  
Phone Number(s): (916) 555-5555 Home/Mobile: (530) 555-5555 Fax: N/A

Attorney or Other Authorized Person Information 2  
Attorney Name (or other person authorized to act on your behalf): N/A  
Address: N/A  
Phone Number(s): N/A Mobile: N/A Fax: N/A

You may select as your ballot designation one of the following designations:  
(a) Your current principal profession(s), vocation(s), or occupation(s) (the original total of three words, separated by a slash ("/")).  
(b) The full title of the public office you currently occupy and to which you were elected.  
(c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.  
(d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.  
(e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s) 3  
Proposed Ballot Designation(s): Director, Excelsior Water District  
Alternate Ballot Designation(s): Teacher/Father/Student  
Alternate Ballot Designation(s):

If your proposed ballot designation is pursuant to Elections Code § 13107(a)(3):  
The professions, vocations or occupations relied upon to support my proposed ballot designation(s) constitute my primary, main or leading professions, vocations or occupations. Initial \_\_\_\_\_

Translation of Proposed Designation: Gender specific translations will default to the masculine form for uniformity in translation unless you specify otherwise. ( ) Masculine ( ) Feminine

In the spaces provided on the next page(s):  
(a) Describe why you believe you are entitled to use the proposed ballot designation.  
(b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.  
(c) Attach any documents or exhibits that you believe support your proposed ballot designation. (Note: It is not necessary to provide copies of Certificates of Election if you are currently a seated member for a voter-nominated office).  
(d) If using the title of an elective office, attach a copy of your certificate of election or appointment.  
(e) Any supporting documents will not be returned to you. Do not submit originals.

It is your responsibility to justify your proposed ballot designation and to provide all requested details.

Rev 4/2024

## Acceptable Ballot Designations Include:

- ✓ Teacher ( must have credentials)
- ✓ Plumber
- ✓ Homemaker
- ✓ Registered Nurse
- ✓ Security Officer
- ✓ Incumbent

## Unacceptable:

- ✓ Concerned Citizen
- ✓ Taxpayer
- ✓ Philanthropist
- ✓ Neighborhood Advocate





# BALLOT DESIGNATION WORKSHEET

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

The justification for the use of the Proposed Ballot Designation from the prior page corresponds with page 2.

## WHAT'S A JUSTIFICATION?

A justification is additional information about why you are proposing the use of the ballot designation. This includes a brief description of your duties as well as the name of your employer, business and a contact who can verify the information is correct and may include a family member.

Note: Comments such as "I work here" or "I've been doing this for 20 years" are unacceptable.

California Secretary of State  
BALLOT DESIGNATION WORKSHEET  
Page 2

If your proposed ballot designation contains one or more slashes (/) separating multiple principal profession(s), vocation(s), or occupation(s) (collectively known as "PVO's"), complete a justification section for each separate PVO.

Justification for use of Proposed Ballot Designation(s) If you are proposing alternate ballot designations, please provide justification for use of those on Page 3.	1	Justification for use of 1 <sup>st</sup> PVO: Currently serving as a Director on the San Juan Water District. I was elected onto the board in November 2012.		
	2	Current or most recent job title: Director	Start/End Dates: 11/6/2012	
	3	Employer Name or Business: San Juan Water District		
	4	Person who can verify this information: Name: Jane Smith Phone Number(s): (916) 123-5555 Email:		
5	Justification for use of 2 <sup>nd</sup> PVO: N/A			
6	Current or most recent job title: N/A	Start/End Dates: N/A		
7	Employer Name or Business: N/A			
8	Person who can verify this information: Name: N/A Phone Number(s): N/A Email: N/A			
9	Justification for use of 3 <sup>rd</sup> PVO: N/A			
10	Current or most recent job title: N/A	Start/End Dates: N/A		
11	Employer Name or Business: N/A			
12	Person who can verify this information: Name: N/A Phone Number(s): N/A Email: N/A			

Before signing below, answer/initial the following questions. Does your proposed ballot designation:

1) Use only a portion of the title of your current elected office?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
2) Non-judicial candidates: Use only the word "incumbent" for an elective office to which you were appointed?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
3) Use more than three total words for your principal professions, vocations, or occupations?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
4) Suggest an evaluation of you, such as outstanding, leading, expert, virtuous, or eminent?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
5) Refer to a status (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupation?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
6) Abbreviate the word "retired"?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
7) Place the word "retired" after the words it modifies? Example: Accountant, retired	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
8) Use an word or prefix (except: "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
9) Use the word "retired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
10) Use the name of a political party or political body?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
11) Refer to a racial, religious, or ethnic group?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS
12) Refer to any activity prohibited by law?	(Y)Yes <input type="checkbox"/> (N)No	Initial: <input type="checkbox"/> JS

If the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.

X John Smith 7 / 14 / 2020  
Candidate's Signature Date Signed: Month Day Year

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 [found at: www.sos.ca.gov]

Rev 09/2019

Make sure that you complete the questions on this page and initial.

**THIS PAGE MUST BE SIGNED AND DATED.**



# BALLOT DESIGNATION WORKSHEET

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

**A.** If you decided to add an Alternate Ballot Designation from line 2 of the first page use section A for the justification.

**B.** To be completed only if you decide to add an additional Alternate Ballot Designation from line 3 of the first page, use section B for the justification.

California Secretary of State  
BALLOT DESIGNATION WORKSHEET  
November 5, 2024 General Election (Elections Code §§ 13107, 13107.3, 13107.5, California Code of Regulations § 20711)  
Page 3

COMPLETE THIS PAGE ONLY if one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please initial.

A	Justification for use of 1 <sup>st</sup> PVO: I currently have my teaching credentials and teach 9th grade at Sunshine High School	Current or most recent job title: Teacher	Start Date: 8/2004	End Date: Present
	Employer Name or Business: Sunshine School District	Person who can verify this information:		
	Name: Happy Gilmore	Phone Number(s): (888) 555-1234	Email: hap_happy@aol.com	
	Justification for use of 2 <sup>nd</sup> PVO: I am a father of 7.	Current or most recent job title: N/A	Start Date: N/A	End Date: N/A
Employer Name or Business: N/A	Person who can verify this information:			
Name: N/A	Phone Number(s): N/A	Email: N/A		
Justification for use of 3 <sup>rd</sup> PVO: I am a student at Rainy Day College taking classes to obtain my Masters Degree.	Current or most recent job title: Student	Start Date: 1/2018	End Date: Present	
Employer Name or Business: Rainy Day College	Person who can verify this information:			
Name: Shooter Gill	Phone Number(s): (916) 123-5555	Email: taptappy@aol.com		
B	Justification for use of 1 <sup>st</sup> PVO: N/A	Current or most recent job title: N/A	Start Date: N/A	End Date: N/A
	Employer Name or Business: N/A	Person who can verify this information:		
	Name: N/A	Phone Number(s): N/A	Email: N/A	
	Justification for use of 2 <sup>nd</sup> PVO: N/A	Current or most recent job title: N/A	Start Date: N/A	End Date: N/A
Employer Name or Business: N/A	Person who can verify this information:			
Name: N/A	Phone Number(s): N/A	Email: N/A		
Justification for use of 3 <sup>rd</sup> PVO: N/A	Current or most recent job title: N/A	Start Date: N/A	End Date: N/A	
Employer Name or Business: N/A	Person who can verify this information:			
Name: N/A	Phone Number(s): N/A	Email: N/A		

Rev 4/2024

**Attention !!!**

If you are not adding any Alternate Ballot Designations, then you are only required to initial the form at the very top.






# CANDIDATE STATEMENT FORM

## What is it?

A statement that is limited to your own personal background and qualifications.

- ✓ All candidates must complete the coversheet.
- ✓ The statement must be type written.
- ✓ We recommend using the Candidate Statement fillable form available on our website.
- ✓ The statement must meet the word count requirement.
- ✓ Review your candidate statement for spelling and grammar before filing. Once submitted, it cannot be changed.

 **COUNTY OF SACRAMENTO VOTER REGISTRATION AND ELECTIONS**  
Candidate Statement Cover Sheet  
Election Date: \_\_\_\_\_

Name of Candidate \_\_\_\_\_ Office Sought and District Number, if applicable \_\_\_\_\_

Estimated Cost of Statement \$ \_\_\_\_\_  Full Term  Short Term

**Information to Candidates:** Your statement may contain your name, and occupation and a brief description of your qualifications and education. Candidates are required to type their statements. Your statement will be printed exactly as submitted, and in the format prescribed by Elections Code §13307. Statements that are not in compliance with the requirements and format as described in the Candidate Guide will be reformatted and set in uniform type by the Elections Official.

**Content:**

- Be accurate. **Statements will be printed as submitted.** Spelling, punctuation and grammatical errors **will not** be corrected by the Elections office; therefore, all statements should be carefully checked before submission.
- Elections Code §13308 restricts any candidate statement to a recitation of the candidate's own personal background and qualifications and prohibits any reference to other candidates for the office sought or to another candidate's qualifications, character, or activities.
- Only a cursory review of the candidate's statement will be done at the time of filing to ensure that the statement is acceptable in content and formatting. If a candidate statement is filed that is not in compliance with the Elections Code, the Elections Official may strike any language not in compliance.

**Word/Paragraph Count:**

- Candidates for Superior Court Judge, County Offices, Special Districts, School Districts and Cities are limited to **200 words and 5 paragraphs.**
- Candidates for U.S. Representative in Congress, State Senator and Member of the State Assembly are limited to **250 words and 6 paragraphs.**
- Candidates for Sacramento County Board of Education are limited to **400 words and 8 paragraphs.**

**Size and Format:**

- Statements will be printed in type of uniform size and spacing, and with uniform spacing.
- Statements must be submitted left justified and in block format. No indentations are permitted.
- Statements will be printed in Arial font.

**Endorsements:**

- Statements containing endorsements must be accompanied by written authorization letter(s) from the person(s) and/or organization(s) offering the endorsement at the time your statement is submitted. Letters must be signed and dated. An email can be submitted as written authorization, must contain the endorser's email signature, and must be submitted within 24 hours of receipt of the candidate statement.

**Permission:**

- If you use someone else's name in your statement, you must file with your statement an original letter from them stating that they are giving you permission to use their name in this manner. Letters must be signed and dated.
- If someone else files your statement, you must file with your statement an original Letter of Authorization stating that you give that person permission to submit your statement and make any changes needed. Letters must be signed and dated by the candidate.

**Submission:**

- Candidate statements must be typed using the template provided on the following page.
- The statement and permission(s) must be filed at the time you file your Declaration of Candidacy, EC §13307 (a)(2)
- Once the statement has been filed, it may not be changed by the candidate.

**Public Examination:**

- Elections Code §13313 allows for a ten-day public examination period of all candidate statements prior to submittal for printing in the County Voter Information Guide. During this period, the Elections Official, or any voter of the jurisdiction in which the election is being held, may seek a writ of mandate or an injunction requiring any or all the material in the candidate statement to be amended or deleted.

YES, I will file a candidate statement – type your statement on the template provided.

In the event there is no opposition for this contest, I wish to withdraw this candidate statement. (optional)

NO, I will not file a candidate statement.

Date: \_\_\_\_\_ Signature of Candidate: \_\_\_\_\_

### NOTE:

You are required to complete the Candidate Statement Cover Sheet even if you are not planning on filing a candidate statement for the County Voter Information Guide.

There is a section above the date and signature line that indicates no statement will be filed.



# CANDIDATE STATEMENT FORM

## DO NOT USE

- ✓ Bullets, stars or asterisks
- ✓ Bolding
- ✓ Italics
- ✓ Underlining
- ✓ All capital letters (with the exception of acronyms or abbreviations)
- ✓ Tables
- ✓ Lists or other formatting requiring indentation

**NOTE:** There is a character limitation of 50 characters max including spaces and punctuation on the Occupation line.

**COUNTY OF SACRAMENTO VOTER REGISTRATION AND ELECTIONS**  
Candidate Statement Form

- **INSTRUCTIONS TO CANDIDATES:** Use the template below to prepare your candidate statement. When finished, print both pages to file your statement. (Must be written in the first person)
- The information in the "TYPE NAME" and "OCCUPATION" fields below will be printed in the candidate statement area of the County Voter Information Guide exactly as it appears below.
- The "OCCUPATION" (Optional) Can differ from ballot designation, not subject to ballot designation regulations. There is a maximum character limit of 50 including spaces.
- If no occupation is listed place "N/A" on the occupation line and that field will appear blank in the County Voter Information Guide.

TYPE NAME: \_\_\_\_\_ OFFICE SOUGHT AND DISTRICT NUMER, IF APPLICABLE \_\_\_\_\_

OCCUPATION: *[character limit is 50 including spaces]* \_\_\_\_\_

**QUALIFICATIONS:**

SAMPLE

I have prepared the above candidate statement (pursuant to Elections Code §13307) that is to be printed in the County Voter Information Guide and mailed to each registered voter who is eligible to vote for me. I understand that Sacramento County is mandated under the Voting Rights Act to provide materials and information in English, Spanish, Chinese, and Vietnamese. There is no refund in the event of County Voter Information Guide delivery delays.

Date: \_\_\_\_\_ Signature of Candidate: \_\_\_\_\_

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**OFFICIAL USE ONLY**

Amount Paid: \_\_\_\_\_ 1<sup>st</sup> ✓ 2<sup>nd</sup> ✓ Endorsements needed?  Yes  No

Check No.: \_\_\_\_\_  Copy of Check in File Number of Paragraphs: \_\_\_\_\_ / \_\_\_\_\_

Receipt No.: \_\_\_\_\_  Copy of Receipt in File Number of Words: \_\_\_\_\_ / \_\_\_\_\_ If yes, are endorsements attached?  Yes






# CODE OF FAIR CAMPAIGN PRACTICES

## INSTRUCTIONS

- ✓ This is an optional form and states that you plan to run a fair campaign.
- ✓ California legislation has passed recommendations on how candidates should run a fair campaign.
- ✓ Should you choose to complete the form please sign and date the bottom.



**California Secretary of State**  
**CODE OF FAIR CAMPAIGN PRACTICES**  
 (Elections Code § 20440)

There are basic principles of decency, honesty, and fair play which every candidate for public office in the State of California has a moral obligation to observe and uphold in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional right to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE

- (1) I SHALL CONDUCT my campaign openly and publicly, discussing the issues as I see them, presenting my record and policies with sincerity and frankness, and criticizing without fear or favor the record and policies of my opponents or political parties that merit this criticism.
- (2) I SHALL NOT USE OR PERMIT the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or his or her personal or family life.
- (3) I SHALL NOT USE OR PERMIT any appeal to negative prejudice based on a candidate's actual or perceived race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age, sexual orientation, sex, including gender identity, or any other characteristic set forth in Section 12940 of the Government Code, or association with another person who has any of the actual or perceived characteristics set forth in Section 12940 of the Government Code.
- (4) I SHALL NOT USE OR PERMIT any dishonest or unethical practice that tends to corrupt or undermine our American system of free elections, or that hampers or prevents the full and free expression of the will of the voters including acts intended to hinder or prevent any eligible person from registering to vote, enrolling to vote, or voting.
- (5) I SHALL NOT coerce election help or campaign contributions for myself or for any other candidate from my employees.
- (6) I SHALL IMMEDIATELY AND PUBLICLY REPUDIATE support deriving from any individual or group that resorts, on behalf of my candidacy or in opposition to that of my opponent, to the methods and tactics that I condemn. I shall accept responsibility to take firm action against any subordinate who violates any provision of this code or the laws governing elections.
- (7) I SHALL DEFEND AND UPHOLD the right of every qualified American voter to full and equal participation in the electoral process.

I, the undersigned, candidate for election to public office in the State of California or treasurer or chairperson of a committee making any independent expenditures, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct my campaign in accordance with the above principles and practices.

<p>John Smith</p> <hr/> <p style="text-align: center;">Print Name</p> <hr/> <p>xx/xx/xx20</p> <hr/> <p style="text-align: center;">Date</p>	<p><i>John Smith</i></p> <hr/> <p style="text-align: center;">Signature</p> <hr/> <p>Natomas Unified School District</p> <hr/> <p style="text-align: center;">Office</p>
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Rev. 08/2019



# FPPC CAMPAIGN FORMS

- ▶ Form 501 – All candidates must file a 501 form before soliciting or accepting contributions
- ▶ Form 470 – Candidates who don't plan on spending \$2000 or more on their campaign will complete a 470 form
- ▶ Form 700 – All candidates running for local elective offices are required to complete a 700 Form





# WHAT FORM SHOULD I FILE?

## BASIC FILING GUIDELINES

### Form 501 - Candidate Intention Statement

**Who:** All Candidates

**When:** Before raising or spending any money, including personal funds

**Where:** Local filing officer

Raise or Spend  
UNDER \$2,000

Raise or Spend  
OVER \$2,000

### Form 470 - Campaign Statement Short Form

**Who:** Candidates who do not intend to raise or spend \$2,000 or more for their campaign, and do not have an open committee

**When:** Anytime, but no later than the date the first pre-election statement is due. The statement covers the entire year

**Where:** Local filing officer

### Form 410 - Statement of Organization

**Who:** Candidates and organizations who raise or spend \$2,000 or more

**When:** Anytime, but required to be filed within 10 days of reaching \$2,000 in contributions or expenditures (or within 24 hours if \$2,000 is reached in the final 16 days before Election Day)

**Where:** Original and copy to Secretary of State, one copy to the local filing officer

### Form 470 - Supplemental

**Who:** Candidate who filed Form 470, but subsequently raised or spent \$2,000 or more for their campaign

**When:** Within 48 hours of raising or spending \$2,000 or more

**Where:** Secretary of State, local filing officer and with each candidate seeking the same office

### Form 460 - Campaign Statement

**Who:** All campaign committees formed by filing a Form 410 and who have raised/spent \$2,000 or more

**When:** Must be filed according to the applicable schedules. Refer to the 4 previous pages for filing schedule

**Where:** Original and one copy to the local filing officer

For more information please visit: <https://www.fppc.ca.gov/content/dam/fppc/NS-Documents/TAD/Candidate%20Toolkit/Campaign-Basics-01-18.pdf>



# FORM 501

\*\*\*ALL CANDIDATES MUST COMPLETE AN FPPC 501 FORM

## INSTRUCTIONS

Select a box at the top of the form indicating if this is an initial filing or an amendment to a form already received.

**Section 1:**  
Add name, address, contact information and office sought including the year the election will take place.

**Section 2:**  
Do not enter any information on Section 2 unless you are a state candidate.

**Section 3:**  
Sign and date the form.

**Candidate Intention Statement**

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

Date Stamp: \_\_\_\_\_

**CALIFORNIA FORM 501**  
For Official Use Only

**1. Candidate Information:**

**NAME OF CANDIDATE** (Last, First Middle Initial) **DAYTIME TELEPHONE NUMBER** **FAX NUMBER (optional)** **EMAIL (optional)**  
 Smith, John L (916 ) 555-5555 (916 ) 555-5555 vote4me@john.com

**STREET ADDRESS** **CITY** **STATE** **ZIP CODE**  
 12345 First Lane Sacramento CA 95132

**OFFICE SOUGHT (POSITION TITLE)** **AGENCY NAME** **DISTRICT NUMBER, if applicable**  **NON-PARTISAN OFFICE**  
 School Board Trustee Natomas Unified School District 1  **NON-PARTISAN OFFICE**

**OFFICE JURISDICTION**  State (Complete Part 2.)  **County**  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) **2020**  **PRIMARY / GENERAL**  **SPECIAL / RUNOFF**  
 (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 XX XX 20XX Signature John Smith  
 (Month, day, year) (Candidate)

FPPC Form 501 (August/2018)  
 FPPC Advice: advice@fppc.ca.gov (866/275-3772)  
 www.fppc.ca.gov





# FORM 470

\*\*\*CANDIDATES WHO HAVE A CANDIDATE CONTROLLED COMMITTEE DO NOT NEED TO COMPLETE AN FPPC 470 FORM

## INSTRUCTIONS

Complete the top of the form with date of the election.

Section 1:  
Add the current election year.

Section 2:  
Print name, address, and any additional contact information.

Section 3:  
Enter title of the office sought or held. Then enter the name of the district in the jurisdiction field.

Section 4:  
Leave this section blank unless you wish to report a candidate-controlled committee.

Section 5:  
Sign and date the form.

Officeholder and Candidate  
Campaign Statement –  
Short Form

Date Stamp

**CALIFORNIA FORM 470**  
For Official Use Only

Date of election if applicable: (Month, Day, Year)  Amendment (Explain Below)

11/03/2020

**1. Statement Covers Calendar Year 20 20**

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
John L. Smith

STREET ADDRESS  
12345 First Lane

CITY STATE ZIP CODE  
Sacramento CA 95132

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
916-555-5555 vote4me@john.com

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
School Board Trustee

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
Natomas Unified School District 1

**4. Committee Information**

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER

**5. Verification**

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on xx/xx/20xx DATE By JOHN SMITH SIGNATURE OF OFFICEHOLDER OR CANDIDATE

FPPC Form 470/470 Supplement (Jan/2016)  
FPPC Advice: advice@fppc.ca.gov (866/275-3772)  
www.fppc.ca.gov



# FORM 700

## INSTRUCTIONS

- ✓ Start with first and last name then complete Section 1 with the name of the district as the agency and title of the office sought as the position.
- ✓ Section 2: Jurisdiction of Office: Check the box associated with "County" and add Sacramento.
- ✓ Section 3: Type of Statement: Check the box for Candidate and enter the date of the election.
- ✓ Section 4: If you have no schedules attached enter 1 for the total number of pages included. If schedules apply, please check the appropriate box and attach schedules.
- ✓ Section 5: Complete this section and make sure to sign and date.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT

Date Initial Filing Received  
Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) Smith FIRST Job (MIDDLE)

1. Office, Agency, or Court  
Agency Name (Do not use acronyms)  
Name of Unified School District  
Division, Board, Department, District, if applicable  
Your Position  
Governance Board Member  
If filing for multiple positions, list below or on an attachment. (Do not use acronyms)  
Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)  
 State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of Sacramento  
 City of \_\_\_\_\_  Other \_\_\_\_\_

3. Type of Statement (Check at least one box)  
 Annual: The period covered is January 1, 2019, through December 31, 2019.  
-or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_ through \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one circle)  
 Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
-or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_ through \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Candidate: Date of Election Nov. 3, 2020 and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary (must complete) Total number of pages including this cover page: 1  
Schedules attached  
 Schedule A-1 - Investments - schedule attached  Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule A-2 - Investments - schedule attached  Schedule D - Income - Gifts - schedule attached  
 Schedule B - Real Property - schedule attached  Schedule E - Income - Gifts - Travel Payments - schedule attached  
-or- None - No reportable interests on any schedule

5. Verification  
MAILING ADDRESS STREET CITY STATE ZIP CODE  
12345 Riverside Way Sacramento CA 95834  
BUSINESS ADDRESS (OPTIONAL) STREET CITY STATE ZIP CODE  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
(916) 5555555 johnsmith1234567@yahoo.com  
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.  
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
Date Signed xxxx/xx/2020 Signature John Smith  
(File the originally signed paper statement with your filing official)

PPP Form 700 - Cover Page (2018/2020)  
admin@fpcc.ca.gov • 916-275-3772 • www.fpcc.ca.gov  
Page 5

**NOTE:** If you are an incumbent re-running for the same office and you just recently filed your 700 – you are still obligated to file a Form 700 for your November 5, 2024, candidacy.

Incumbents may provide a new cover sheet. Check the box for candidate and enter the date of the election. Attach copies of the schedules, if applicable.





# ADDITIONAL QUESTIONS REGARDING FPPC

- ✓ Review the applicable Campaign Disclosure Manual
- ✓ Candidates and committee treasurers can find the forms in this packet and additional forms on the FPPC website: [www.fppc.ca.gov](http://www.fppc.ca.gov)
- ✓ Email: [advice@fppc.ca.gov](mailto:advice@fppc.ca.gov)
- ✓ Phone: 866-ASK-FPPC (1-866-275-3772)
- ✓ Telephone advice is available:  
Monday through Thursday 9:00 a.m. - 11:30 a.m.



# WRITE-IN CANDIDATES

- ✓ Notwithstanding any other provision of law, a person may not be a write-in candidate at the general election for a voter-nominated office. Elections Code § 8606
- ✓ Candidates that wish to run as write-ins must complete a Statement of Write-in Candidacy Form.
- ✓ Signers of nomination petitions for write-in candidates shall be voters in the district or political subdivision in which the candidate is to be voted on.
- ✓ The names of Certified Write-In candidates will not appear on the ballot. Voters will need to write in the certified candidate's name on the write in line.
- ✓ No fee shall be required of a write-in candidate.
- ✓ Write-in candidates may not file a candidate statement.





# SERVICES AVAILABLE

- ✓ Voter Files
- ✓ Walking Lists
- ✓ Voting Activity Status Report (formerly the vote by mail subscription)
- ✓ Precinct Lists
- ✓ Maps – [Map Request Application](#) can be found on our website

For fee information and to obtain an application for voter data please visit our website at:  
[www.elections.saccounty.gov](http://www.elections.saccounty.gov)

Voter registration information may be provided to candidates running for office, a ballot measure committee and person or groups for elections, scholarly, journalistic, political or governmental purposes as determined by the Secretary of State. (Title 2, division 7, article 1, § 19003 of the California code of regulations, and elections code § 2194 and government code § 6254.4)



# QUESTIONS?

## Contact the Campaign Services Division:

Sacramento County Voter Registration & Elections

Campaign Services Division

7000 65<sup>th</sup> Street, Suite A

Sacramento, CA 95823

Phone (916) 875-6276

Fax (916) 854-9567

Email: [voters-campaignservices@saccounty.gov](mailto:voters-campaignservices@saccounty.gov)

**City candidates, please contact your city clerk for more information and requirements.**