

OFFICE OF

ASSESSOR-COUNTY CLERK-RECORDER & ELECTIONS REGISTRATION & ELECTIONS DIVISION

COUNTY OF SAN MATEO

San Mateo County Candidate Registration Form

NAME AS REGISTERED (PLEASE PRINT IN ALL CAPS)							
FIRST	MIDDLE NAME OR		RINITIAL	LAST			
RESIDENCE STREET ADDRESS			CITY			ZIP CODE	
MAILING STREET ADDRESS (if different from above)			CITY		ZIP CODE		
DAYTIME TELEPHONE NO. EVEN			ING TELEPHONE NO.				
EMAIL ADDRESS							
OFFICE TITLE (Include District, Division or Office No.)				☐ CHECK IF FULL TERM			
				☐ CHECK IF UNEXPIRED TERM			
ARE YOU AN INCUMBENT? IF "YES" SELECT ONE				AP		PPOINTMENT DATE	
☐ YES ☐ NO ☐ ELECTED ☐ APPO				NTED			
Authorization to Deliver Candidate Filing Documents (Choose One)							
I elect to receive and file my candidate filing documents during the Candidate Filing Period (July							
13 to August 7, 2020) for the November 3, 2020 Presidential Primary Election:							
☐ By Email ☐ In Person (Please make an appointment)							
I understand that all filing documents must be properly executed and delivered to the County Elections Officials by August 7, 2020.							
I understand that I, as a candidate, may electronically submit my completed documents to the County Elections Official so that the County Elections Official may begin the review and							
verification process as soon as is practicable. However, in order to be a qualified candidate for							
the office in which they seek, the hard copies of the completed documents with original signatures must be received by the County Elections Official by August 7, 2020 for the							
November 3, 2020 Presidential General Election.							
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"I am aware of the qualifications for office and understand this is not an official filing document."							
<u>-</u>						ng document."	
SIGNATURE OF CANDIDATE (Age					ficial fili DATE	ng document."	