

CANDIDATE INFORMATION REQUEST FORM

ELECTION DATE: November 3, 2020 Presidential General Election

Date: _____ Incumbent: Yes No (if yes) Elected Appointed

Name of Candidate (as registered)

My Name is: Masculine Feminine Transgender Masculine Transgender Feminine Other: _____

FIRST _____ MIDDLE (do not include hyphenated last name) _____ LAST (include all or hyphenated last names) _____

Name of Candidate (as to appear on Nomination Documents)

My Name is: Masculine Feminine Transgender Masculine Transgender Feminine Other: _____

FIRST _____ MIDDLE (do not include hyphenated last name) _____ LAST (include all or hyphenated last names) _____

Candidate Resident Address

Candidate Mailing Address (if different than resident address)

Day Phone (include area code) _____ Evening Phone (include area code) _____ Mobile Phone (include area code) _____

Email Address

Name of Office Sought

Jurisdiction

Running for: Full Term Short Term Recall

PHONETIC SPELLING OF NAME (REQUIRED)

Do people often ask you how to pronounce your name? With the option to vote using an audio ballot in Santa Clara County, it is important that we understand *how to pronounce your name correctly, especially if uncommon*. In the area below, please *spell your name phonetically*, exactly as you wish it to be recorded and heard by voters using the audio ballot. This must match your requested name on the Declaration of Candidacy form.

Example Name: Ryan Nunez

First Name (*Rye - in*) _____ Middle or Nick Name (*if requesting*) _____ Last Name (*Noon - Yez*) _____

FOR OFFICE USE ONLY

Contest Number _____

Candidate Number _____

Filing Date _____

Affidavit Number _____

District Code _____

Precinct Number _____

Registration Date & Party _____

Previous Reg. Date & Party (only Primary Election) _____