



# COUNTY OF KINGS ELECTIONS DEPARTMENT

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**Lupe Villa**  
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## CANDIDATE APPLICATION

Note: This is a public document, which can be made available upon receipt of the appropriate request from an individual or organization.

### Candidate Information

Name as you are registered to vote				
First	Middle	Last		
Office (include district if applicable)				Are you the Incumbent?
				Yes <input type="checkbox"/> No <input type="checkbox"/>
Residence Address Optional for Judicial Candidates [EC §8023(c)].				
Number	Street	City	State	Zip
Mailing Address				
Number	Street	City	State	Zip
Business Address				
Number	Street	City	State	Zip
Phone Numbers				
Daytime	Evening		Fax	
E-mail Address			Website Address (if applicable)	
Name as to appear on the ballot				
Will you file a Candidate Statement?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you intend to raise money for your campaign?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Will you use a Ballot Designation?		<input type="checkbox"/> Yes <input type="checkbox"/> No		

I declare under penalty of perjury that I am a resident of the district or trustee area for which I am running for (exception: Congressional Offices).

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

Election Official to complete back of application

**Office Use Only**

Voter ID Number	Confidential Voter?
	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date of Registration	Incumbents Only
	Appointed <input type="checkbox"/> Elected <input type="checkbox"/>
Precinct Number	Registered Residential Address within District?
	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If district qualification discrepancy, verify residency on map. Attach map signed by candidate to application.</b>	
Date Verified: _____ Verified By: _____	
FPPC Form provided (Raising money = 501, No = 470)	<input type="checkbox"/> Form 501 <input type="checkbox"/> Form 470

**Name of Election Officer who assisted the Candidate**

Print Name: \_\_\_\_\_ Sign Name: \_\_\_\_\_