Scenic Pacifica

Incorporated Nov. 22, 1957

Submit Form to City Clerk's Office

Contact: Sarah Coffey, Phone: 650-738-7307, Email: scoffey@pacifica.gov

NOVEMBER 5, 2024 MUNICIPAL ELECTION
REQUEST TO RECEIVE NOMINATION DOCUMENTS

CANDIDATE FILING PERIOD: 8:30 a.m. July 15, 2024 to 1:30 p.m. August 9, 2024*

Contact Information:

Full Name:	
Street Address:	
Daytime Phone:	
Email Address:	

Request for Candidate Nomination Documents

I, _____, am filing for the office of City Council Member
            Printed Name of Candidate

District _____ and I am a registered voter residing at the following address:
            District

_____ in the City of Pacifica.
            Candidate's Residential Address

I am requesting Candidate Nomination Documents to be issued by appointment with the City Clerk. Voter registration will be verified by City Clerk prior to scheduling appointment for issuance of nomination papers.

Acknowledgment of Filing Deadlines for Documents Requiring Original Signatures

A candidate may electronically submit his or her completed documents to the City Clerk by email to allow the elections official to begin the review and verification process as soon as is practicable. However, in order to be a qualified candidate for the office, **the required completed documents with original signatures** (preferably in blue ink) **must be received by the City Clerk by the close of the nomination period for that particular office (1:30 p.m. on August 9, 2024)**.

*Extended Candidate Filing Period: In the event an eligible incumbent does not file by 1:30 p.m. on August 9, 2024, the candidate filing period will be extended to 5:00 p.m. on Wednesday, August 14, 2024.

Candidate documents with original signatures received by the City Clerk after the deadline for filing will not be accepted. Postmark date is not accepted to meet the deadline; documents must by physically received and verified in the City Clerk's Office prior to the deadline.

_____

By signature below, I acknowledge receipt of this information regarding required candidate documents from the City of Pacifica elections official and confirm that the information I have provided is true and correct.

_____   _____
            Candidate's Signature   Date