



# CANDIDATE WORKSHEET

## County of El Dorado PERMISSION TO POST PERSONAL INFORMATION ON ELECTION DEPARTMENT'S WEBSITE (Government Code §6254.21)

PLEASE PRINT CLEARLY

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Candidates Name (How you request to have it appear on Nomination Documents)

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Office Sought (Including district, division, or trustee area number if applicable)

**PLEASE COMPLETE THIS FORM FULLY.** Check mark the boxes for the contact information you would like us to release to the public. *Candidates must release at least one address (with the exception of judges) and one phone number to the public.*

Grant       Deny

(Permission to the El Dorado County Elections Department to post the information listed below on the Department's website at [www.edcgov.us/Elections](http://www.edcgov.us/Elections) for the Consolidated General Election to be held November 3, 2020).

\_\_\_\_\_

Residence Street Address (required)

City

Zip

\_\_\_\_\_

Mailing Address

City

Zip

\_\_\_\_\_

Campaign Address

City

Zip

\_\_\_\_\_

Daytime Telephone Number

\_\_\_\_\_

Evening Telephone Number

\_\_\_\_\_

Campaign Telephone Number

\_\_\_\_\_

Fax Telephone Number

\_\_\_\_\_

Cell Telephone Number

\_\_\_\_\_

Email Address

\_\_\_\_\_

Website Address

**COMPLETE THE INFORMATION BELOW ONLY IF APPLICABLE**

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Nomination papers received by (if other than candidate)

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Representative Address

City

Zip

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Representative Telephone Number