



OFFICE OF
**ASSESSOR-COUNTY CLERK-
 RECORDER & ELECTIONS**
 COUNTY OF SAN MATEO

MARK CHURCH
 CHIEF ELECTIONS OFFICER &
 ASSESSOR-COUNTY CLERK-RECORDER

List of Certified Municipal Candidates

Election Date: November 8, 2022 Name of City: _____

I hereby certify that the following is a certified list of candidates for the Office Sought (title of office sought will be used as ballot heading) _____
 _____. The information indicated, including ballot designations, correctly reflects the nomination documents filed for the ensuing election.

To enter the requested information please right click on the corresponding gray field, select "update field" and enter the requested information in the box that appears. Press ok when complete. For check box fields, simply click on the box you wish to check.

Candidate Name on Ballot <i>As provided on Declaration of Candidacy</i>	Ballot Designation <i>As provided on Declaration of Candidacy</i>	Occupation to be Printed w/ Candidate Statement <i>As provided on Candidate Statement of Qualifications Form</i>	Candidate Statement Filed <i>Check All That Apply</i>	Character-Based Name Form <i>Provide Candidate Preference as Indicated on Form Filed</i>
Candidate Name	Ballot Designation	Occupation	<input type="checkbox"/> Hard Copy w/ Signed Form <input type="checkbox"/> Soft Copy <input type="checkbox"/> None Filed	<input type="checkbox"/> Provided Character-Based Name <input type="checkbox"/> No Character-Based Name. Transliteration Needed
Candidate Name	Ballot Designation	Occupation	<input type="checkbox"/> Hard Copy w/ Signed Form <input type="checkbox"/> Soft Copy <input type="checkbox"/> None Filed	<input type="checkbox"/> Provided Character-Based Name <input type="checkbox"/> No Character-Based Name. Transliteration Needed
Candidate Name	Ballot Designation	Occupation	<input type="checkbox"/> Hard Copy w/ Signed Form <input type="checkbox"/> Soft Copy <input type="checkbox"/> None Filed	<input type="checkbox"/> Provided Character-Based Name <input type="checkbox"/> No Character-Based Name. Transliteration Needed
Candidate Name	Ballot Designation	Occupation	<input type="checkbox"/> Hard Copy w/ Signed Form <input type="checkbox"/> Soft Copy <input type="checkbox"/> None Filed	<input type="checkbox"/> Provided Character-Based Name <input type="checkbox"/> No Character-Based Name. Transliteration Needed
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Dated this _____ day of _____, 20____. Name: _____ Title: _____