



**OFFICE: (AD, SD, CD & Dist. #): Assembly District 17**

**Filing Deadline (Prior to Endorsing Caucus):** It may take up to two business days after receipt of filing to send candidates the list of delegates eligible to vote for the relevant district. A candidate may file the day of the appropriate Endorsing Caucus prior to the consideration of the relevant district at which the district is considered.

Please fill out completely – type or print. The campaign public address, social media aliases, website, and campaign phone may be posted on the CDP website. All other information is for internal use only and will not be shared publicly.

**Candidate Name** \_\_\_\_\_

Elected Position/Present Occupation \_\_\_\_\_

Committee Name \_\_\_\_\_ Committee ID# \_\_\_\_\_

Campaign Public Physical Address \_\_\_\_\_

(Cross-streets: \_\_\_\_\_)

City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

Other Counties in District \_\_\_\_\_

Candidate’s Permanent Mailing Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

Campaign: Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Personal: Mobile (\_\_\_\_) \_\_\_\_\_ Day (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Website: \_\_\_\_\_ Social Media (Twitter/Facebook/etc.): \_\_\_\_\_

E-mail \_\_\_\_\_@\_\_\_\_\_ Website \_\_\_\_\_

Facebook \_\_\_\_\_ Twitter \_\_\_\_\_ Instagram \_\_\_\_\_

**Campaign Manager:** \_\_\_\_\_

Mobile (\_\_\_\_) \_\_\_\_\_ Day (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**Consultant:** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mobile (\_\_\_\_) \_\_\_\_\_ Day (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**Press Secretary:** \_\_\_\_\_

Mobile (\_\_\_\_) \_\_\_\_\_ Day (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**CANDIDATE’S INITIALS:** \_\_\_\_\_

## 2021 Special Election Candidate Registration Form – Page 2 of 3

**Treasurer (or Name of Person Filing Campaign Reports):** \_\_\_\_\_

Campaign Report Filing Address (if different from Campaign Address) \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Mobile (\_\_\_\_) \_\_\_\_\_ Other Internal (\_\_\_\_) \_\_\_\_\_

**Key Contact #1** \_\_\_\_\_

Title/Relation to Candidate \_\_\_\_\_

Mobile (\_\_\_\_) \_\_\_\_\_ Day (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**Key Contact #2** \_\_\_\_\_

Title/Relation to Candidate \_\_\_\_\_

Mobile (\_\_\_\_) \_\_\_\_\_ Day (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

\_\_\_\_\_  
Candidate's Initials **By initialing here, I affirm that I have been provided a link to the most current CDP Platform (www.cadem.org/platform).**

\_\_\_\_\_  
Candidate's Initials **By initialing here, I affirm that I have read the most current CDP Platform.**

**By signing this form, I acknowledge that I am a registered Democrat seeking the endorsement of the California Democratic Party (CDP). I agree to abide by the CDP's By-Laws and I will seek to resolve any and all problems in accordance with the CDP By-Laws. I am seeking this partisan office with the Democratic Party as my party preference.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please mail the completed form, along with the appropriate non-refundable filing fee of \$250 for State Assembly (payable to the California Democratic Party), biography, and photo to:

California Democratic Party  
Attn: Unique Wilson, Party Operations Manager.  
1830 9th Street  
Sacramento, CA 95811  
unique@cadem.org  
(916) 442-5707 / FAX (916) 442-5715

Questions? Comments? Call our Sacramento office or e-mail Unique Wilson at unique@cadem.org. Information can also be found on our website at www.cadem.org.

**For CDP office use:**

Fee Rec'd

Biography Rec'd

Photo Rec'd



**2021 Special Election Candidate Endorsement Filing Fee  
Credit Card Authorization – Page 3 of 3**

Please fill out completely if you are submitting candidate filing fee by credit card. Type or print.

**OFFICE:** (AD, SD, CD): \_\_\_\_\_AD 17\_\_\_\_\_ **Candidate Name**

**NAME OF INDIVIDUAL, COMMITTEE OR ORGANIZATION TO BE USED FOR REPORTING PURPOSES**

\_\_\_\_\_ **ID NUMBER** \_\_\_\_\_

**CREDIT CARD NUMBER** \_\_\_\_\_ **EXP. DATE** \_\_\_\_/\_\_\_\_

**NAME AS IT APPEARS** \_\_\_\_\_  **INTERMEDIARY**

**BILLING ADDRESS FOR CARD** \_\_\_\_\_ **CVV** \_\_\_\_\_

**CITY, STATE, ZIP** \_\_\_\_\_

**PHONE** \_\_\_\_\_

Include Business  
Name if Self-  
Employed

**EMPLOYER** \_\_\_\_\_ **OCCUPATION** \_\_\_\_\_

**I CONFIRM THAT I AM A UNITED STATES CITIZEN OR A PERMANENT RESIDENT ALIEN**

**By signing this form, I am authorizing the California Democratic Party to charge a non-refundable filing fee of \$250 for State Assembly.**

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Fax: California Democratic Party. Attention Unique Wilson- (916) 442-5715.  
Questions? Please contact Unique Wilson- (916) 442-5707 or unique@cadem.org**

Contributions are not tax deductible. Your contribution will be used in connection with federal elections and is subject to the limitations and prohibitions of the Federal Election Campaign Act.

Corporate and union contributions are acceptable under California Law to be used in connection with nonfederal elections. California law permits contributions up to \$40,500 per calendar year for use in supporting state elections. California law imposes no limits on contributions used for purposes other than supporting state candidates.

Federal law requires Political committees to use our best efforts to collect and report the name, mailing address, occupation and employer for each individual whose contributions exceed \$200 in a calendar year.

If paying by check: Please make your checks payable to ‘California Democratic Party.’ (FPPC, State ID # 741666. FEC, Federal ID # C00105668.)