KERN COUNTY ELECTIONS DIVISION

CANDIDATE INFORMATION FORM FOR THE GENERAL ELECTION November 5, 2024

Note: This form is public information.

District/Office/Trustee Number	er:	
2. Term of office:		
☐ Full		
☐ Short		
3. Are you an Appointed Incumb	ent to the office?	
☐ Yes (Consider using Ap	ppointed Incumbent as your ballot designa	tion.)
□ No		
4. Are you an Incumbent to the o	office?	
	cumbent as your ballot designation.)	
□ No	anner on the hellet.	
5. Your Name as you want it to a	appear on the ballot:	
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6. What will your Ballot Designat	tion ber (Up to three words.)	
7. Residence Address:		
	City:	Zip:
8. Mailing Address, if different fr		
	City:	Zip:
9. Business Address:	·	·
	City:	Zip:
10. Phone Numbers:	Campaign Phone Numb	
Daytime:	Phone:	
Evening:	Mobile:	
Fax:	Fax:	
11. Email Address:		
12. Website:		
13. Gender: (For translation purpo	oses only)	
☐ Male		
☐ Female		
didate Signature:	I	Date: