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ELECTIONS DIVISION (916) 657-2166 1500 - 11<sup>th</sup> STREET SACRAMENTO, CA 95814 Voter Registration Hotline 1-800-345-VOTE For Hearing and Speech Impaired Only 1-800-833-8683 e-mail: comments@ss.ca.gov

**BILL JONES** Secretary of State State of California

Information Sheet of Qualifications and Requests

## PRESIDENTIAL WRITE-IN CANDIDATE QUALIFICATIONS PROCEDURES MARCH 7, 2000 CALIFORNIA PRIMARY ELECTIONS (American Independent, Green, Libertarian, Natural Law, Reform and Republican)

## I. QUALIFICATIONS

- A. be a natural-born citizen of the United States,
- B. be at lest 35 years of age, and
- C. be a resident of the United States at least 14 years.

U.S Const., art. II §1 (5)

## II. REQUIREMENTS

- A. Endorsement of Write-In Candidacy for President of the United States
  - 1. The endorsement of write-in candidacy shall contain the following information:
    - a. candidate's name,
    - b. residence address,
    - c. a declaration stating that the candidate is a write-in candidate,
    - d. the name of the office for which the candidate is running,
    - e. the party nomination which the candidate seeks, and
    - f. the date of the election

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In addition, we request that you provide us with a telephone number to reach the presidential candidate and an address to which correspondence regarding the write-in candidacy may be addressed so that we can expedite communications.

2. The endorsement of Write-In Candidacy for Presidential Candidates for the Primary Election must be filed with the Secretary of State by February 15, 2000. § 6441, 6621, 6822

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## ENDORSEMENT OF WRITE-IN CANDIDACY FOR PRESIDENTIAL PRIMARY

(American Independent, Green, Libertarian, Natural Law, Reform, and Republican)

Bill Jones Secretary of State 1500 11<sup>th</sup> Street Sacramento, CA 95814

I, \_\_\_\_\_, believe that my name will be written-in on the March 7, 2000 ballot as candidate for election to the office of President of the United States for the \_\_\_\_\_ Party. I hereby endorse such a write-in candidacy.

I therefore request that the Secretary of State notify each of the County Elections Officials to count all write-in votes cast for me.

Dated: \_\_\_\_\_

(Signature)

(Address)

(City, State, Zip)

(\_\_\_\_)\_\_\_(Telephone Number)