

SAN SIMEON COMMUNITY SERVICES DISTRICT



APPLICATION FOR VACANT BOARD OF DIRECTOR SEAT

Name: _____

Phone # _____

Address: _____

Email _____

Please list experience you have that would benefit your serving on the SSCSD Board.

Why do you want to be a Director on the SSCSD Board?

_____ I am a registered voter residing in the above named jurisdiction. If appointed, I will qualify and accept the above stated office and serve to the best of my ability.

_____ I am aware that any person who files or submits for filing a declaration of candidacy knowing that it or any part of it has been made falsely is punishable by a fine or imprisonment, or both, as set forth in Election Code § 18203.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of candidate

Date

Application received by

Date