

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

This entire form must be completed, or it will not be accepted and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST be provided. UPON FILING, THIS WORKSHEET WILL BE A PUBLIC RECORD.

Candidate Name; Chris Duncan	Gander (optional, for translation use only):	Male
Office: Member, San Clemente City Counc	il <sub>Email:</sub> chris@votechrisdunca	
Home Address:		
Malling Address:		
Business Address		
Phone Number(s) (949) 328-4573  Business: Hon	ne/Mobile: <b>(949) 328-4573</b> Fax:	
Attorney Name (or other person authorized to act on your behalf)		
Address:		
mana Caran	lle: Fax:	
	Attorney Name (or other person authorized to act on your behalf)  Address: Phone Number(s)	Attorney Name (or other person authorized to act on your behalf):  Address: Phone Number(s)

# You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash (4/\*)].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" If you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office,

Proposed Ballot Designation(s) Proposed Ballot Designation(s): Homeland Security Prosecutor

Alternate Ballot Designation(s) 1: Homeland Security Attorney

Alternate Ballot Designation(s) 2: Homeland Security Advisor

# In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. Do not submit originals.

# It is your responsibility to justify your proposed ballot designation and to provide all requested details.

	Justification for use of 1st PVO:	served as a Homeland Se	curity Prosecutor in th	e Federal
	Government from July	2003 through September	2019. I am dor	na practicina
	law in the same	area now that I did	is DHS. ap	J MACTICINE
	Current or most recent job title: As	sistant Chief Counsel	Start/End Dates: 11/15-9	/19
	Employer Name or Business: U.S	. Department of Homeland	l Security	
	Person who can verify this inform	ation:	· · · · · · · · · · · · · · · · · · ·	
Justification	Name: Mary Cupp	Phone Number(s): (714) 79	34-4595 Email: cuppma	kar@aol.com
for use of Proposed	Justification for use of 2 <sup>nd</sup> PVO:			
Ballot Designation(s) If you are				
proposing alternate ballot	Current or most recent job title:		Start/End Dates:	**************************************
designations, please provide	Employer Name or Business:			
Justification for use of those on	Person who can verify this informa	tion:		
Page 3.	Name:	Phone Number(s):	Email:	
	Justification for use of 3rd PVO:			
	Current or most recent job title:	,	Start/End Dates:	/
	Employer Name or Business:		-carasina sacioni	
	Person who can verify this informat	ion:	W harden and the second and the seco	
	Name:	Phone Number(s):	Email:	
Rofere electron balan	P. 45 1 11 4 11			
1) Use only a po	w, answerringial the following quest rtion of the title of your current elected offic	tions. Does your proposed ballot de	signation:	/
<ol> <li>Non-judicial ca</li> </ol>	andidates: Use only the word "incumbent" t	or an elective office to which you were and	□Yes	-/·- ~ <u>-/·</u>
o) Ose more mai	I miles rotal motas for your buricipal brotes	SiOns, vocations, or occupations?	pointed? DYes	
<ul><li>4) Suggest an ev</li><li>5) Refer to a stat</li></ul>	aluation of you, such as outstanding, leading / leading	ng, expert, virtuous, or eminent? of than a profession, vocation, or occupa	∐Yes	ErNo Initial ♥
<ul> <li>a) Appreviate the</li> </ul>	Motalliead,			
7) Place the word	I "retired" after the words it modifies? Exan	iple: Accountant, retired	□Yes □Yes	
ە) Use aan word o	r prefix (except "retired") such as "former" i	Of "AX-" to refer to a former profession was	roffon as a series with a 10 best	
a) cae the Moin	reared along with a current profession, vo of a political party or political body?	cation, or occupation? Example: Retired F	firefighter/Teacher □Yes	13/No Initial 2)9
11) Refer to a racia	al, religious, or ethnic group?		□Yes	
12) Refer to any ac	ctivity prohibited by law?	•	□Yes □Yes	27No Initial 225
li de la companya de	f the answer to any of these questio	ns is "yes," your proposed ballot d	esignation is likely to be rejec	ited.
x			7131	1 2020
	Candidate's Signature	Date Signed:	Month Day	
		Date digited.	Month Day	Year

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at <a href="https://www.scs.ca.gov">www.scs.ca.gov</a>).

COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided, if this page is not applicable, please initial:

	THE PARTY AND TH	
	Justification for use of 1* PVO: I served as a Homeland S	ecurity Attorney in the Federal
	Government from July 2003 through Septembe	or 2010 T
	Current or most recent job titile: Assistant Chief Counsel	Start/Enc Dates: 11/15-9/19
	Employer Name or Business: U.S. Department of Homelan	nd Security
	Person who can verify this information:	
	Name: Mary Cupp Phone Number(s): (714)	794-4595 Email: cuppmakar@aol.com
	Justification for use of 2nd PVO: 4the same area v	now as I did in DHS. cop
Justification for Alternate Ballot	Current or most recent job title;	Start/End Dates;
Designation(s) 1	Employer Name or Business:	
	Person who can verify this information:	
#33,774,44	Name: Phone Number(s):	Email:
	Justification for use of 3™ PVO:	
	Current or most recent job title:	At the terminal process of the second
	Employer Name or Business:	Start/End Dates:
	Person who can verify this information:	
	Name: Phone Number(s):	<b>-</b>
×-	) Hone (Author(2)).	Email:
	Justification for use of 1st PVO: I served as a Homeland Se	ecurity Advisor in the Federal
	Government from July 2003 through September	2019
	Current or most recent job title; Assistant Chief Counsel	Start/End Dates: 11/15-9/19
	Employer Name or Business; U.S. Department of Homeland	d Security
	Person who can verify this information:	
	Name: Mary Cupp Phone Number(s): (714) 7	794-4595 <sub>Email:</sub> cuppmakar@aol.com
	Justification for use of 2nd PVO: Fand advising or	
	area as I did in DHS.)	989
Justification for Alternate Ballot	Current or most recent job title:	Start/End Dates:
Designation(s) 2	Employer Name or Business:	7771 - 10 2 2000)
	Person who can verify this information:	
	Name: Phone Number(s):	Email:
	Justification for use of 3 <sup>rd</sup> PVO:	
	Current or most recent job title:	Start/End Dates:
	Employer Name or Business:	
	Person who can verify this information:	
	Name; Phone Number(s)	Emails



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## 1 2-5 5-1 2-1 2-1 3-1 3-1 3-1 3-1 3-1 3-1 3-1 3-1 3-1 3		Candidate Name: Bill Hart Gender (optional, for translation use only): Male  Office: Member of the City Council-Fore Year Form Email: 26hart@cox.net
Candidate Information	1	Home Address: PO Box 3544, San Clemente, CA 92672
		Business Address;  Phone Number(s) Business:  Home/Mobile;  Fax: N/A
	2	Attorney Name (or other person authorized to act on your behalf): Christy MacBrick-Hart
		Phone Number(s) Business: (949) 412-3949 Fax: M4

# You may select as your ballot designation one of the following designations:

(a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("P)].

(b) The full title of the public office you currently occupy and to which you were elected.

- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s) Alternate Ballot Designation(s): Software Sales Director

Alternate Ballot Designation(s) 1: Director of Contracts

Alternate Ballot Designation(s) 2: Director of Administration

#### In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
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		Person who can verify this infon	mation:	•	54ephan d	Ponalchson
ustification	331,3	Name: Stephen Don	mation:  Notice Phone Number(s):(214) 519	-3816 Email:	Oldra-	USTA COM
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•		Justification for use of 3rd PVO:				
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<ol> <li>Non-jud</li> <li>Use mo</li> </ol>	re than th		fessions, vocations, or occupations?		□Yes Œ/Ño	Initial 144
<ul><li>2) Non-jud</li><li>3) Use mo</li><li>4) Sugges</li></ul>	ore than th It an evalu	uation of you, such as outstanding, le	ading, expert, virtuous, or eminent?		□Yes Œ/No	Initial
<ul><li>2) Non-jud</li><li>3) Use mo</li><li>4) Sugges</li><li>5) Refer to</li></ul>	ore than th It an evalue It a status	uation of you, such as outstanding, le (Veteran, Activist, Founder, Scholar)			□Yes II-No □Yes II-No	Initial Initial
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COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided, if this page is not applicable, please initial:

Current or most recent job title: Director of Contracts & Administrative and Dates:

Besides major account sales, one

100	Chibioset Isattle of Busilless: PHICH I SCHING	1097, 466.
	Name: Stephen Donalels on Phone Nur	nber(s): (214)519-3816 Ematter deva-susar com
	Justification for use of 2 <sup>nd</sup> PVO:	
Justification for Alternate Ballot	Current or most recent job title:	Start/End Dates:
Designation(s) 1	Employer Name or Business:	Statuting Dates.
	Person who can verify this information:	
V.	Name; Phone Nun	nber(s); Email;
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	Person who can verify this information:	
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	Employer Name or Business: LARA Techno	Lagran Fac
	Person who can verify this information:	stephen. claud Ison
		ber(s):(214)519-3816 Email@/dra-Usa.com
	Justification for use of 2 <sup>nd</sup> PVO:	Denisia - 1 De 1 1 DO CO Elitali, - 1 FI NO DO CO DE
Justification for Alternate Ballot	Current or most recent job title;	Start/End Dates:
Designation(s) 2	Employer Name or Business:	
	Person who can verify this information:	
	Name: Phone Num	ber(s): Email:
	Justification for use of 3rd PVO:	
	Current or most recent job title:	Start/End Dates:
	Employer Name or Business:	
	Person who can verify this information:	
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Candidate Information		11.10	etionai, for translation use only):  qwalkeremes comes comes.
Attorney 2	S 27	Attorney Name (or other person authorized to act on your behalf):	
		Phone Number(s) Business: Mobile:	Fax:

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Proposed Ballot Designation(s)

Proposed Ballot Designation(s);	City	of San Clemente CouncillMEMB
Alternate Ballot Designation(s) 1:	,	of San Chamante Council MAN
Alternate Ballof Designation(s) 2:		

#### In the spaces provided on the next page(s):

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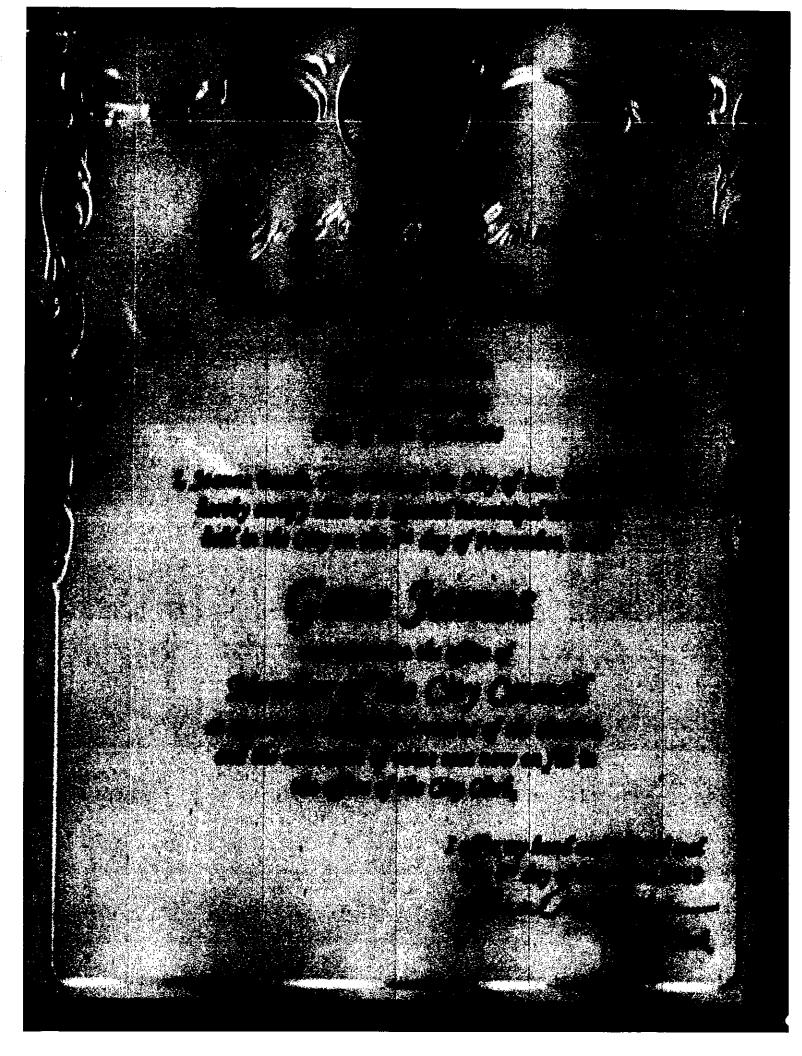


m an elected member of  Council member Starvend Dates: Nov 20A - Res  susiness: City of Sharvend Dates: Nov 20A - Res  rify this information: City Clerk Phone Number(s): Email: Badeyo San-clem  council member Starvend Dates: NOV 20A - Res  a of 2nd PVO:  Starvend Dates: NOV 20A - Res  starvend Dates: Starve	lification use of posed	Current or most recent job title: Co	ty of Son C  city cterk	Start/End Dates: N	or 20A	- Res
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r principal professions, vocations, or occupations?  putstanding, leading, expert, virtuous, or eminent?  □YesKNo Initia	Use only a port Non-judicial ca Use more than Suggest an eva	Employer Name or Business:  Person who can verify this information Name:  Name:  N, answer/initial the following question of the title of your current elected office? Indidates: Use only the word "Incumbent" for three total words for your principal professional unation of you, such as outstanding, leading	Phone Number(s):  ns. Does your proposed ballot des  an elective office to which you were appoins, vocations, or occupations? , expert, virtuous, or eminent?	Email: signation:	□Yes □ No payes No □Yes No	Initia Initia Initia
	Refer to a statu Abbreviate the	is (Veteran, Activist, Founder, Scholar), rath	er than a profession, vocation, or occupa	tions?	□Yes (大)No	Initial 📈
nder, Scholar), rather than a profession, vocation, or occupations?	Place the word	"retired" after the words it modifies? Examp	e: Accountant, retired		□Yes <b>y⊒</b> No	Initial
nder, Scholar), rather than a profession, vocation, or occupations?    Yes No   Initial       Yes No   Initial       It modifies? Example: Accountant, retired   Yes No   Initial	Use an word or Use the word "i	r prefix (except *retired*) such as *former* or retired* along with a current profession, wors	"ex-" to refer to a former profession, vocation, or occupation? Example: Refired Fig.	ation, or occupation?	□Yes <b>ELN</b> o	Initial
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For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at <a href="https://www.scs.ca.gov">www.scs.ca.gov</a>).

COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please initial:

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		Justification for use of 1 <sup>st</sup> PVO:		
			ected nember	of City Council
		Current or most recent job litle: Coc	_ ·	, , , , , , , , , , , , , , , , , , ,
		Employer Name or Business:	Ly of Son	Clement -
		Person who can verify this information:		
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		Justification for use of 2 <sup>nd</sup> PVO:		3
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Justification for Alternate Ballot		Current or most recent job title:		Start/End Dates:
Designation(s) 1		Employer Name or Business:		
		Person who can verify this information:		
		Name:	Phone Number(s):	Email:
		Justification for use of 3rd PVO:		
•		Current or most recent job title;		Start/End Dates:
		Employer Name or Business:		
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5				
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Alternate Ballot Designation(s) 2	B	Current or most recent job title:	· · · · · · · · · · · · · · · · · · ·	Start/End Dates:
, <u></u>		Employer Name or Business:		
		Person who can verify this information: Name:	Physical Lands of A	
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		Employer Name or Business:		otativa paica.
		Person who can verify this information:		
	<b>美國</b>	Name:	Phone Number(s)	Email:



This entire form must be completed, or it will not be accepted and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If Information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST be provided, UPON

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		Candidate Name: Thor Johnson	Gender (optional, for	translation use only): Male	
;; ;; ;; ;;		Office: City Council	Emeil: 1		
Candidate Information	1	Home Address: Same as above			<del></del>
		Business Address: Same as above Phone Number(s) 949-554-8329 Business:			-
	2 I		Home/Mobile: Same	Fax: N/A	
Attorney Information	2	Address: N/A	r behalf): M/A		
		Phone Number(s) Business:	Mobile: N/A	Fax: <b>N/A</b>	

## You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office,
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s)

Proposed Ballot Designation(s): Small Business Owner	
Alternate Ballot Designation(s): Small Business Owner  Alternate Ballot Designation(s) 1: Sin Clemente Ann profit	Director
Alternate Ballot Designation(s) 2:	

## In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. Do not submit originals.

#### It is your responsibility to justify your proposed ballot designation and to provide all requested details.

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	***	Justification for use of 1st PVO:		,	· · · · · · · · · · · · · · · · · · ·	
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		Current or most recent job title: Part	ner	Start/End Dates:		
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	::	Person who can verify this informati				
		Name: Elizabeth lighic	Phone Number(s): 714~	313-5982 Fmails		
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proposing alternate ballot	(4)	Current or most recent job title:		Start/End Dates:		
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justification for		Person who can verify this information	on:			
use of those on Page 3.	10 d 10 d	Name:	Phone Number(s):	Email:		
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			W	// // // // // // // // // // //		
		Current or most recent job title:		Start/End Dates:		
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	1.5.	Person who can verify this information	on:			
		Name:	Phone Number(s):	Email:		
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		<ul> <li>answerfinitial the following questi ion of the title of your current elected office</li> </ul>	• • •	аезідлацоп:	□Yes ⊞No_ Initial TJ	
2) Non-jud	icial car	ndidates: Use only the word "Incumbent" fo	r an elective office to which you were a	appointed?	□Yes ID-No Initial 17	
		three total words for your principal profess sluation of you, such as outstanding, leadin			□Yes ⊡ No Initial 🦅 □Yes ⊡ No Initial 📆	
		is (Veteran, Activist, Founder, Scholar), rat		upations?	□Yes 121No Initial 17	
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		prefix (except "retired") such as "former" or retired" along with a current profession, voc			□Yes ⊉No Initial <u>↑</u> □Yes ⊉No Initial <u>↑</u>	
		of a political party or political body?	nation, of occupation) Example, Nettle	a circulgritor, readirer	☐Yes © Ho initial ]	
		l, religious, or ethnic group?			□Yes BrNo Initial 📆	
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		the answer to any of these question	na ia yea, your proposed ballo	t designation is likely to	or rejected.	1
х				081	7 1 2020	
		Candidate's Signature	Date Sign	ed: Month	Day Year	

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at <a href="https://www.scs.ca.gov">www.scs.ca.gov</a>).



COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please Initial:

	Justification for use of 1st PVO;	
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11 11 11 11 11 11 11 11 11 11 11 11 11	Employer Name or Business: Tagetter As Du	Philanthapic Society
	Person who can verify this information:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Person who can verify this information:  Name: 710 51110 Phone Number(s):	944-554-8724 Email:
	Justification for use of 2 <sup>nd</sup> PVO:	Littali,
Justification for Alternate Ballot A	Current or most recent job title;	Start/End Dates:
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	Person who can verify this information:	
	Name: Phone Number(s):	Email:
	Justification for use of 3 <sup>rd</sup> PVO:	
	Current or most recent job title:	Start/End Dates:
	Employer Name or Business:	
	Person who can verify this information:	
	Name: Phone Number(s):	Email:
	Justification for use of 1* PVO;	
	Current or most recent job title:	Start/End Dates:
	Employer Name or Business:	
	Person who can verify this information:	
	Name: Phone Number(s):	Email:
	Justification for use of 2 <sup>nd</sup> PVO;	
Justification for Alternate Ballot B	Current or most recent job title:	Start/End Dates:
Designation(s) 2	Employer Name or Business:	
Maria Parti	Person who can verify this information:	
	Name: Phone Number(s):	Email:
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	Employer Name or Business:	And the state of t
	Person who can verify this information:	1
#14.50 kg/1.00	Name: Phone Number(s):	Email:

INTERNAL REVENUE SERVICE

P. O. BOX 2508

CINCINNATI, OH 45201

Date: SEP 22 2015

TOGETHER AS ONE PHILANTHROPIC SOCIETY C/O THOR JOHNSON 258 AVERIDA LOBEIRO B SAN CHEMENTE, CA 92672 Employer Identification Number: 46-1292925
DLN: 17053222333025
Contact Person: CHRIS BROWN ID
Contact Telephone Number:

ID# 31503

Accounting Period Ending:
December 31

\* (877) 829~5500

Public Charity Status: 170(b)(1)(A)(vi) Form 990/990-EZ/990-N Re

Form 990/990-EZ/990-N Required:

Effective Date of Exemption:
November 7, 2014
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Jeffrey I. Cooper

Director, Exempt Organizations

Rulings and Agreements



This entire form must be completed, or it will not be accepted and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST be provided, UPON FILING, THIS WORKSHEET WILL BE A PUBLIC RECORD.

	The state of the s	Candidate Name: Joseph A. Ke.	UNEY Gender (optional, for trans	
Candidate Information	4	Home Address:		
		Mailing Address		
		Business Address:		
		Phone Number(s) Business:	Home/Mobile:	Fax:
		Attorney Name (or other person authorized to act on you	ur behalf): PAVL R	ZA
Information	2	Address: 30012 Juy Gua	ENN DRIVE STI	E 285, CA 92677
	v .	Business; 949 - 496 - 0718	Mobile: 714 - 267 - 20	140 Fax: 949 - 496 - 0718

You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected,
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s)

Proposed Ballot Designation(s):	MALL BUSING	ess Owner
Alternate Ballot Designation(s) 1:	BUSINESS	DWHEN
Alternate Ballot Designation(s) 2: MONT 6 A	•	

#### In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. Do not submit originals.

It is your responsibility to justify your proposed ballot designation and to provide all requested details.



; ;	Justification for use of 1st PVO: I OWN AND DERNATE A  SMALL RUSINESS IN SAN CLEMENT
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	SMALL BUSINESS IN SAN CLEMENT
A	
14 P	Current or most recent job title: RNES: ORNE Start/End Dates: 9/14/14-
	Employer Name or Business: CALIFORNIA TO FUNDING INC. (165
	Person who can verify this information:  Name: Jeny Kenney Phone Number(s): -5241 Email: Yahoo. Co
1	Name: Jony Keney Phone Number(s) - 526 Email: Yahoo. Co
ification (i)	Justification for use of 2 <sup>nd</sup> PVO:
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gnation(s) u are	
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of those on	Name: Phone Number(s): Email:
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(and the state of	Employer Name or Business:
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	Name: Phone Number(s): Email:
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	I candidates: Use only the word "incumbent" for an elective office to which you were appointed?  Initial **  Initi
Suggest an o	evaluation of you, such as outstanding, leading, expert, virtuous, or eminent?
	tatus (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupations?
Place the wo	the word "retired? UYes Woods it modifies? Example: Accountant, retired UYes Woods it modifies? Example: Accountant, retired UYes Woods it modifies?
	d or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation?
Use the word	rd 'retired' along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher
	ne of a political party or political body? □Yes ■ No Initial —
	acial, religious, or ethnic group?
Refer to any	y activity prohibited by law? □Yes □No Initial ↓↓  If the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.
	a die allerie. Le ally of diese questions is 1965, 1966 proposed ballot designation is likely to be rejected.
	6 / 3 / 203
·	Candidate's Signature Date Signed: Month Day Year

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at <a href="https://www.sos.ca.gov">www.sos.ca.gov</a>).

COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please initial:

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!	Employer Name or Business:	LIGORNIA TO 1	FUNDING PRE	SENT
	Person who can verify this informa	tion:	INC. Jenian 5261 Emailyano.	1300
	Name: Lem Kene	Y Phone Number(s):	5361 Emalityanio.	con
	Justification for use of 2 <sup>nd</sup> PVO:	<del>, , , , , , , , , , , , , , , , , , , </del>	7	
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Justification for	Current or most recent job title;		Start/End Dates:	<u> </u>
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	Person who can verify this informa	lion		
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	Person who can verify this informat			130
Carrier Co.	Name: Jony Lyne	Phone Number(s): 949 - 8	Email: Yaho	· (0/1
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Designation(s) 2	Employer Name or Business:		***	
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	Name:	Phone Number(s):	Email:	

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

This entire form must be completed, or it will not be accepted and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST be provided, UPON FILING, THIS WORKSHEET WILL BE A PUBLIC RECORD.

0 V		Candidate Name: PATRICK MINNEHAN Office: City Council	Gender (optional, for translation use only): MALE  Email: MINNEHAN 45. @ GMAIL. COM
Candidate	1	Home Address:	
Ĵ		Business Address:  Phone Number(s) Business:  WA  Hom	ne/Mobile: 949 444 6493 Fax: NA
Attorney Information	2	Attorney Name (or other person authorized to act on your behalf):  Address:  Phone Number(s)  Business:  Mob	N/A

#### You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office,

Proposed Ballot Designation(s)

Proposed Bailot Designation(s):	Chief Infor	mation of	icon.
Alternate Ballot Designation(s) 1:	Healthcare	Consulting	Executive
		₹	Consultanta

## In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. Do not submit originals.

## It is your responsibility to justify your proposed ballot designation and to provide all requested details.

						···
14.2 2.3 7.3	Justification	for use of 1 <sup>st</sup> PVO: M	y careen in Heal	there Inform	vation Te	schoology
	has ex	LEEDED 33	years with incre	ASING RESAMEN	hillie and	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	TRUSTO	o Advison	to the Executive	Suite of Heal	thears o	ORGANIZAT.
	Current or mo	at recent job title: Ch	ief Information	A Start/End Dates:	4/2019 -	2/2020
200 - 200 -		ne or Business:	1ASON HOAlth			
77 A.S. 57 A.S. 20 A.S.	Person who d	an verify this informati	ion: Chief Mudical Offi	-		
cation	Name: Dr.	DEAN Gushi	Phone Number(s): 360	432 7728 Email:	Deushoe	(A) MASSUCE
of sed		for use of 2 <sup>nd</sup> PVO;				
nation(s)						
ing (4) te ballot (6)	Current or mos	t recent job title:		Start/End Dates:		
ations, provide	Employer Nam	e or Business:				
tion for 🔣	Person who c	an verify this informatio	on:			
hose on	Name:		Phone Number(s):	Email:		
	Justification fo	or use of 3rd PVO;		-		
	Current or mosi	recent job title:		Start/End Dates:		
	Employer Name	or Business:				
	Person who ca	n verify this informatio	n:			
Ĝ.W	Name:		Phone Number(s):	Email:		
signing belo	ow, answer/initial	the following questic	ons. Does your proposed ballo	t designation:		
Use only a po	ortion of the title of yo	our current elected office?	?		□Yes BiNo	Initial E
use more tha	an three total words fo	or your principal profession	r an elective office to which you were ons, vocations, or occupations?	appointed?	∐Yes D⊁No DYes El No	Initial (E)
Suggest an e Refer to a sta	valuation of you, such tus (Veteran, Activist	h as outstanding, leading . Founder, Scholar), raft	), expert, virtuous, or eminent? er than a profession, vocation, or oc	aunations?	□Yes 🗷 No	Initial (T)
Abbreviate the	e word *retired?			cupations?	□Yes ⊠ No □Yes ⊗No	Initial (TOW)
Place the wor	rd "retired" after the w	ords it modifies? Examp	le: Accountant, retired		□Yes 🖪 No	Initial Com
Use the word	or prenx (except *retil *retired* along with a	"eq") such as Tormer" or current profession, voca	"ex-" to refer to a former profession, ation, or occupation? Example: Retire	vocation, or occupation?	□Yes & No	Initial
Use the name	of a political party of	political body?	ation, or occupation? Example; Relift	eu rirengnter/Teacher	□Yes 12 No □Yes 12 No	Initial (Car)
Refer to a rac	dal, religious, or ethni	c group?			□Yes Æ No	Initial (Free
	activity prohibited by I				□Yes 25No	Initial 🗫
··	in the answer to a	ny of these question	s is "yes," your proposed ballo	ot designation is likely to	be rejected.	
				71 -	29 1 .	· · · · · · · · · · · · · · · · · · ·
	Candida	te's Signature	Date Sign	ed: Month	Day	Year
	•		•			* ***

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at <a href="https://www.sos.ca.gov">www.sos.ca.gov</a>).



COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please Initia

FILE	i

	Current or most recent job title:	Syenes with encreasing Ro Consulting Executions SR Mag CERNER Corporation	
	Person who can verify this infor	<b>,</b>	
	Name: Bill Domer	27 Phone Number(s): 610 209 - 1995	3 Email: B; 11. Domport @ Corne
	Justification for use of 2 <sup>nd</sup> PVO:		
istification for ternate Ballot	Current or most recent job title:		Start/End Dates:
esignation(s) 1	Employer Name or Business:		
	Person who can verify this infor	mation:	
	Name:	Phone Number(s):	Email:
	Justification for use of 3rd PVO:		
	Current or most recent job title:		Start/End Dates:
	Employer Name or Business:		
	Person who can verify this inform	nation:	
	Name:	Phone Number(s):	Email:

Justification for Alternate Ballot Designation(s) 2

Current or most recent job title: Employer Name or Business: Person who can verify this information: Phone Numberts Justification for use of 2nd PVO: Current or most recent job title: Start/End Dates: Employer Name or Business: Person who can verify this information: Name: Phone Number(s): Email: Justification for use of 3rd PVO: Current or most recent job title: Start/End Dates: Employer Name or Business: Person who can verify this information: Name: Phone Number(s): Email:

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

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Candidate Information		Candidate Name: Charles R. Smith	-	ptional, for translation use only);	Male
		Office: City Conneil, San Clemente	(4-yr) - Email: 3	smith. c4@ gmail.com	
	3	Home Address;			
		Mailing Address: Think as Home			
	2/2	Business Address:			
	- 1	Phone Number(s) Business:	Home/Mobile:	Fax:	
		Attorney Name (or other person authorized to act on	your behalf);		
Attorney Information	2	Address:			
		Phone Number(s) Business:	Mobile:	Fax:	

#### You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s)

Proposed Ballot Designation(s): Corporate	Banker	
Afternate Ballot Designation(s) 1:		
Alternate Ballot Designation(s) 2:		

#### In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. Do not submit originals.

#### It is your responsibility to justify your proposed ballot designation and to provide all requested details,



, ,	
* : * :	Justification for use of 1st PVO: I provide banking services to corporations
4 2 2	
	Current or most recent job title: Sevin Vin President Start/Eng Dates: July 2017/
4 4.	Employer Name or Business: City National Bank
	Person who can verify this information:
relification	Name: Karon Cohen Phone Number(s): 213-673-9015 Email: 9 aron. cohen Ochb. com
ruse of allot	Justification for use of 2 <sup>nd</sup> PVO:
esignation(s) you are oposing temate ballot	Current or most recent job title; Start/End Dates:
signations, 🖺	Employer Name or Business:
ease provide 🦠 stification for	Person who can verify this information:
e of those on 🥳 age 3.	Name: Phone Number(s): Email:
	Justification for use of 3 <sup>rd</sup> PVO:
	Current or most recent job title: Start/End Dates:
	Employer Name or Business:
\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Person who can verify this information:
4. A 1. A	Name: Phone Number(s): Email:
efore signing bel	Name: Phone Number(s): Email:  pw, answer/initial the following questions. Does your proposed ballot designation:
Non-judicial Use more th Suggest and Refer to a st	pandidates: Use only the word "Incumbent" for an elective office to which you were appointed?  Initial CFS In three total words for your principal professions, vocations, or occupations?  Initial CFS Initial C
,	e word "retired?  If "retired" after the words it modifies? Example: Accountant, retired   If "Yes 课 No Initial 企写
) Use an word	or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation?
0) Use the nam	e of a political party or political body?
	pial, religious, or ethnic group? □Yes □ No Initial □ X S □Yes □ No Initial □ X S □ Yes □ Yes □ No Initial □ X S □ Yes □ Ye
,	If the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.
	813120
	8/3/20
	Candidate's Signature Date Signed: Month Day Year

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at <a href="https://www.sos.ca.gov">www.sos.ca.gov</a>).



COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided, if this page is not applicable, please initial:

	Justification for use of 1st PVO:			
VIII.				
	Current or most recent job title:		Start/End Dates:	
	Employer Name or Business;		***************************************	714
	Person who can verify this information:		1	
	Name:	Phone Number(s):	Email:	
	Justification for use of 2 <sup>nd</sup> PVO:	r none rramporta).	LAUGUI,	
	edamicanon for dec of 2 1 vo.			
Justification for Alternate Ballot A	Current or most recent job title;		Start/End Dates;	
Designation(s) 1	Employer Name or Business:			
T. C.	Person who can verify this information:	,		
	Name:	Phone Number(s):	Email:	
	Justification for use of 3rd PVO:			
			- v married - ma	
	Current or most recent job title:	· · · · · · · · · · · · · · · · · · ·	Start/End Dates:	
	Employer Name or Business:			
	Person who can verify this information:			
	Name:	Phone Number(s):	Email:	•
	Justification for use of 1st PVO:			
		· · · · · · · · · · · · · · · · · · ·		
	Current or most recent job title:			
	Oditient of thost lecent ion title:		Start/End Dates:	ľ
			Start/End Dates:	<del></del>
	Employer Name or Business:		Start/End Dates:	
		Phone Number(s):		
	Employer Name or Business: Person who can verify this information:	Phone Number(s):	Start/End Dates: Email:	
	Employer Name or Business:  Person who can verify this information:  Name:	Phone Number(s):		
Justification for Alternate Ballot	Employer Name or Business:  Person who can verify this information:  Name:	Phone Number(s):		
Direction	Employer Name or Business:  Person who can verify this information:  Name:  Justification for use of 2 <sup>nd</sup> PVO:	Phone Number(s):	Email:	
Justification for Alternate Ballot	Employer Name or Business:  Person who can verify this information:  Name:  Justification for use of 2 <sup>nd</sup> PVO:  Current or most recent job title:	Phone Number(s):	Email:	
Justification for Alternate Ballot	Employer Name or Business:  Person who can verify this information: Name:  Justification for use of 2 <sup>nd</sup> PVO:  Current or most recent job title:  Employer Name or Business:	Phone Number(s):  Phone Number(s):	Email:	
Justification for Alternate Ballot Designation(s) 2	Employer Name or Business:  Person who can verify this information: Name:  Justification for use of 2 <sup>nd</sup> PVO:  Current or most recent job title: Employer Name or Business: Person who can verify this information:		Email: Start/End Dates:	
Justification for Alternate Ballot	Employer Name or Business:  Person who can verify this information: Name:  Justification for use of 2nd PVO:  Current or most recent job title:  Employer Name or Business:  Person who can verify this Information: Name:		Email: Start/End Dates:	

Phone Number(s):

Email:

Employer Name or Business:

Name:

Person who can verify this information:

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

This entire form must be completed, or it will not be accepted and you will not be entitled to a bailot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST be provided. UPON FILING, THIS WORKSHEET WILL BE A PUBLIC RECORD.

<u>,                                     </u>		Candidate Name: Teff Weuman Gender (optional, for translation use only): MALE
Candidate Information	1	Office: Liti (anci) Tyer Term Email: Jeffwellman \$62020@qmail.com Home Address:  Mailing Address:
		Business Address: N/A Phone Number(s) 916.580.5397 Home/Mobile: 916.580.5387 Fax: N/A
Attorney Information	. 2	Attorney Name (or other person authorized to act on your behalf): Brian Phelps, Lager of LLP  Address: 301 N Lalle # 1002, Pasadena CA 91101  Phone Number(s)
	!	Phone Number(s) (801) 971-9412 Mobile: (801) 971-9412 Fax:

#### You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office,

Proposed Ballot Designation(s)

3

Proposed Ballot Designation(s):

Alternate Ballot Designation(s) 1:

Alternate Ballot Designation(s) 2:

Regional Director / Sales Regions

Regional Sales Direction

In the spaces provided on the next page(s):

Care ...

Sales Unector Alberthance

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
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- (e) Any supporting documents will not be returned to you. **Do not submit originals.**

## It is your responsibility to justify your proposed ballot designation and to provide all requested details.



· · · · · · · · · · · · · · · · · · ·						
Justification for use of Proposed Bailot Designation(s) f you are Proposing Alternate bailot designations, blease provide ustification for use of those on Page 3.	Justification for use of 1st PVO: I Serve AS a regional sales director (30/19/hrs)  for a health case products (ompany: Bushuss development is my main responsibility. Bushuss Development is a majority of my recommend to most recent job title: Resident Sales Director Start/End Dates: 10/2017 / Current Employer Name or Business: Milled X  Person who can verify this information:  Name: Sam Ball Phone Number(s): 949-745-2295 Email: Shalle mimeds. Com  Justification for use of 2nd PVO: T am h the advanced Healthrae Company.  Space with Milled at Regulative Medicine Company.  Current or most recent job title: Milled at Regional Sales Director Start/End Dates: 10/2017 / Current Employer Name or Business: Milled X  Person who can verify this Information:  Name: Sam Ball Phone Number(s): 949-795-2245 Email: Shall@ minedx. Com  Justification for use of 3rd PVO:					
	Current or most recent job title: Start/End Dates:					
	Employer Name or Business: Aller NIA					
and the state of t	Person who can verify this information:					
. st statement	Name: Phone Number(s): Email:					
1) Use only a por 2) Non-judicial ca 3) Use more than 4) Suggest an ev 5) Refer to a state 6) Abbreviate the 7) Place the word 8) Use an word o 9) Use the word " 10) Use the name 11) Refer to a rack	Answer/initial the following questions. Does your proposed ballot designation:  on of the title of your current elected office?  Ididates: Use only the word "Incumbent" for an elective office to which you were appointed?  Initial West No  Initi					
1	the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.					
(	07 / 31 / 2020					
	Candidate's Signature Date Signed: Month Day Year					

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 23711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at <a href="https://www.sos.ca.gov">www.sos.ca.gov</a>).

Justification for Alternate Ballot Designation(s) 1

COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please initial:

Justification for use of 1st PVO:	am a regional	Sales director for Minedix.
Business Deve		are my man responsibilities
Current or most recent job title: Reside	141 Sales Director	Start/End Dates: 10/2014 - Cores
Employer Name or Business:	edx	
Person who can verify this information:		
Name: Sam Ball	Phone Number(s): 949. 3	145.2245 Email: Shall a mimede Com
Justification for use of 2nd PVO;		
Current or most recent job title:		Start/End Dates:
Employer Name or Business:	•	
Person who can verify this information:		
Name:	Phone Number(s):	Email:
Justification for use of 3rd PVO:		
h		
Current or most recent job title:	· • • · · · · · · · · · · · · · · · · ·	Start/End Dates:
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:

Regional Sales Pirector Start/End Dates: 10/2017- Present Current or most recent job title: Mimedx Employer Name or Business: Person who can verify this information: Email: 5641 Justification for use of 2nd PVO: healthcare etschoo Justification for Current or most recent job title: Start/End Dates: В Aiternate Ballot Designation(s) 2 MiMedx Employer Name or Business: Person who can verify this information: Phone Number(s): 949. 795. 2245 Email: Shall & Milmed. Com Justification for use of 3rd PVO: Current or most recent job title: Start/End Dates: Employer Name or Business: Person who can verify this information:

Phone Number(s):

Émail:

Name:



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Candidate Information		Candidate Name: Aaron T. Washington Gender (optional, for translation use only): MALE  Office: City Council 4-Your Term Email: aaron Office realty group. con  Home Address:  Mailing Address: SAME  Phone Number(s)  Business: 949-240-1212 (H) Home Mobile:  ax: N/A
Attorney Information	10 mg 2 mg c	Attorney Name (or other person authorized to act on your behalf): Chris Emam:  Address: 18031 Trvine Blvd. Suite 103 Tustin, CA 92780  Phone Number(s) 714. 203. 8374 bbile: 714.381. 4979 Fax: 714.276.9964

#### You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
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- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s)

Proposed Ballot Designation(s): San Clemente Businessman	
Alternate Ballot Designation(s) 1: Orange County Brusinessman	
Alternate Ballot Designation(s) 2: Local Post Censultant	

#### In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) if your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
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- (e) Any supporting documents will not be returned to you. Do not submit originals,

#### It is your responsibility to justify your proposed ballot designation and to provide all requested details.



		7,				<del></del>		
		Justification for use	of 1st PVO:	n Clemente	Busi	NESSMAN	becau	se I'
			•••	iness with 8				
	55 A	1,	en76 203			12.0	<i>J</i>	
		Current or most recen	t job title: 🙎 🖰	les Assoc	hate	Start/End Dates:	Ep 20/1	Present
		Employer Name or Bu		ishive Hat	hwa			Clemente
		Person who can veri	fy this information:		•	<b>5</b>	·	
Justification		Name: lom F	'an Ko	Phone Number(s): 9	49-92	2.9790 T	ontranc	od bhhsea
for use of	6	oustification for use	of 2 <sup>nd</sup> PVO;	onsultan-		cause I		
Proposed Ballot		Engineeri	These	dership oc	h <u>uice</u>	s to be	STARSSE	s that
Designation(s) If you are		repair a	ed built	ANaval a	rdco	maercia	/ ships	r. (1099)
proposing alternate ballot		Current or most recent	job title: Proj	ect Mak		Start/End Dates:	,	<u> </u>
designations, please provide		Employer Name or Bu	siness: Tura	Kien SCA	10	d		
justification for		Person who can veri	y this information:	J				
use of those on Page 3,		Name Micc	Ruiz_	Phone Number(s): 6	19-73	3 - 8:5 950 ail: m	1ick@t	SSCA
	9	Justification for use	of 3rd PVO:					· · · · · · · · · · · · · · · · · · ·
			<u> </u>					
		Current or most recent	job title:			Start/End Dates:		
		Employer Name or Bus	iness:				<del>-</del>	
		Person who can verif	y this information:					
		Name:		Phone Number(s):		Email:		
						- 10		
				. Does your proposed b	allot desig	nation;	المحاد	1.30 4. //
		on of the title of your our ididates: Use only the wo		elective office to which you	were appoin	ted?	⊇s Mino □Yes SiNo	Initial OV
				vocations, or occupations?	.,		□Yes M No	Initial A
				pert, virtuous, or eminent? nan a profession, vocation,	or occupation	ne?	□Yes Mo □Yes Wino	Initial A
6) Abbrevi	ate the v	word *retired?	·		or occupation		□Yes SCNo	Initial Q
		"retired" after the words it					□Yes <b>S</b> No	initial 🕢
				to refer to a former profes			□Yes No	initial <u>a</u>
		eurec" along with a currer f a political party or politic		, or occupation? Example:	Ketired Fireti	gnter/ i eacher	□Yes <b>ig(N</b> o □Yes <b>⊠(N</b> o	Initial 🐼
		, religious, or ethnic group					□Yes No	Initial 🗬
		lvity prohibited by law?					□Yes XNo	Initial 🕢
	lf	the answer to any of	these questions is	"yes," your proposed	ballot desi	gnation is likely t	o be rejected.	
X						10010	)') ' ~	) , , , , , , l
^		Candidate's S	San africa		Signed:	07 G	$\frac{\sqrt{3}}{2}$	2 <i>020</i> Year

Current or most recent job title:

COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please initial:

	M LEn	nployer Name or Business:	rshive Hatho	way	
The state of the s	1236	rson who can verify this information:		)	$\neg$
	Na	me: Tum Franks	Phone Number(s): 249.	922.9772 Email: Tom Franko Obh	SCA .
	վա	stification for use of 2nd PVO:			
Justification for Alternate Ballot	<b>∆</b> Cu	rrent or most recent job title;	·	Start/End Dates:	
Designation(s) 1	Em	ployer Name or Business:			
	Pe	rson who can verify this information:			
	Na Na	me:	Phone Number(s):	Emai:	
	ıut	stification for use of 3 <sup>rd</sup> PVO:			
	Cui	rrent or most recent job title:		Start/End Dates:	
	Em	ployer Name or Business:			
	Per	son who can verify this information:			
***	Na	me:	Phone Number(s):	Email:	
	Jus	tification for use of 1st PVO: Cons	sultant becau	ise I provide my Engine	resk
		eadership service	5 to companies	repairing Noval/Connected S	hils
	Cur	rent or most recent job title: Projec	ot Mar	Start/End Dates: MAY 2019 - F	NESEN
	14".	ployer Name or Business: Turn			
	\$29)	son who can verify this information:	•		
	Nan	ne: Mick Ruis	Phone Number(s): 619.7	33,8592 Email: mick@Hksscaffo	Id 10
	Jus	tification for use of 2nd PVO:			
46					
Justification for Alternate Ballot	Cun	rent or most recent job title:		Start/End Dates:	
Designation(s) 2	Emp	ployer Name or Business;			
	Pen	son who can verify this information:	,		
	Nam	ne;	Phone Number(s):	Email:	
	Just	tification for use of 3rd PVO:			
	Curr	rent or most recent job title:		Start/End Dates:	
	Emp	loyer Name or Business:			
	<b>3</b>	son who can verify this information:			
	Nam		Phone Number(s):	Email:	
r <b>09/2</b> 019					

Start/End Dates: 5'Ep 20/6 to Pres

This entire form must be completed, or it will not be accepted and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST be provided. UPON FILING, THIS WORKSHEET WILL BE A PUBLIC RECORD.

	9	Candidate Name: Jeff Fourice JR Gender (optional, for translation use only): Male					
Candidate Information		Office: Menber	4 40	c city own	Email:	Blooms IT ish Pube 6m	ail
	€3.∮ <b>1</b> 3	Home Address:					
		Mailing Address:		· · · · · · · · · · · · · · · · · · ·			
		Business Address:					
		Phone Number(s) Business:		Hor	ne/Mobile; `	Fax:	
Attorney		Attorney Name (or other pe	erson authorized	to act on your behalf	- XX	ie	
Information	2	Address:					
		Phone Number(s) Business:	· · · · · · · · · · · · · · · · · · ·	Mot	ile:	Fax:	

#### You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

Proposed Ballot Designation(s)

Proposed Ballot Designation(s): Small Bus	iness owner
Alternate Ballot Designation(s) 1: Far   Restau	ment duren
Alternate Ballot Designation(s) 2:	Owner

#### In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. Do not submit originals.

## It is your responsibility to justify your proposed ballot designation and to provide all requested details.



. 19					
	Justification for use of 1st PVO:				
	I aun and opening a small Business				
	Current or most recent job title: President   Ceo   Owner   Start/End Dates: 11-120 - Current				
	Employer Name or Business: JSP Enterprises / DBA: Blooms Irish Pub				
2007 2007 8008	Person who can verify this information:				
Justification	Name: Jeff Provonce Phone Number(s): 720 587-5132 Email: Blooms Irish Rb 00				
for use of Proposed	Justification for use of 2 <sup>nd</sup> PVO:				
Ballot	The smul Business I own 11 A BAT Restrict				
Designation(s) If you are					
proposing alternate ballot Current or most recent job title: President Coo Country Start/End Dates: 1/1/20 - Current					
designations, please provide	Employer Name or Business: USP Enterprises / DRA. Blooms IT Su PUD				
Justification for use of those on	Person who can verify this information:				
Page 3.	Name: Jeff Provance Phone Number(s): 720 587-5132Email: Bloom's Iron Pubro 6 mail				
	Justification for use of 3rd PVO:				
The second secon	See Apove				
2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	Current or most recent job title: Start/End Dates:				
	Employer Name or Business:				
	Person who can verify this information:				
हैं। क	Name: Phone Number(s): Email:				
Pafera signing helev					
	v, answer/initial the following questions. Does your proposed ballot designation:				
1) Use only a portion of the title of your current elected office? 2) Non-judicial candidates: Use only the word "Incumbent" for an elective office to which you were appointed?					
<ol> <li>Use more than t</li> </ol>	three total words for your principal professions, vocations, or occupations?				
<ul><li>4) Suggest an eval</li><li>5) Refer to a status</li></ul>	aluation of you, such as outstanding, leading, expert, virtuous, or eminent?  Initial P  Initial P  Initial P  Initial P				
Abbreviate the way	s (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupations?  □Yes 및 No Initial 1/3 word "retired?				
<ol><li>Place the word *</li></ol>	7) Place the word "retired" after the words it modifies? Example: Accountant, retired				
8) Use an word or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation?					
<ol> <li>Use the word *re</li> <li>Use the name of</li> </ol>	etired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher  I'Yes I'No Initial Tr				
	of a political party or political body?  I, religious, or ethnic group?  □Yes, ☑ No				
	tivity prohibited by law?				
lf t	the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.				
x	7/31/2020				
<del>- (</del>					
	Candidate's Signature Date Signed: Month Day Year				

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at <a href="https://www.sos.ca.gov">www.sos.ca.gov</a>).



COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please initial:

Justification for Alternate Ballot A Designation(s) 1	Current or most recent job t	ille: President (CEO Occur	Start/End Dates: 11/20 - coment
	Person who can verify this	s information:  Phone Number(s)	Email: Blooms trish Pubes
	Employer Name or Business	<u> </u>	Start/End Dates:
	Person who can verify this  Name:  Justification for use of 3rd	Phone Number(s):	Email:
	Current or most recent job til		Start/End Dates:
	Person who can verify this		Email;

A Rusinuss Current or most recent job title: President (ceo launer Start/End Dates: Employer Name or Business: JSP Enterprises DBA: Blooms IrisH PUB Person who can verify this information: Phone Number(s): 720587-512 Email Blooms ITUN Phone Provonce Justification for use of 2nd PVO: Justification for B Current or most recent job title: Alternate Ballot Start/End Dates: Designation(s) 2 Employer Name or Business: Person who can verify this information: Name: Phone Number(s): Email: Justification for use of 3rd PVO: Current or most recent job title: Start/End Dates: Employer Name or Business: Person who can verify this information: Name: Phone Number(s): Email: