

Candidate Statement of Qualifications (CSQ)

(Elections Code Sections 13307-13311)

RECEIVED IN COUNTY

Name:
Office:
Term: Years
Election Name: June 2, 2026 Statewide Direct Primary Election

By: _____

Instructions to Candidate: Your Statement

- is only accepted at the time filing is completed and cannot be accepted after filing a Declaration of Candidacy.
- must be typed on the form provided.
- may include your age, occupation, and education along with a description of qualifications.
- shall not include your party affiliation, or membership or activity in partisan political organizations for nonpartisan candidates.
- shall not make reference to another candidate's qualifications, character, or activities.
- must be accompanied by copies of any endorsements used in the statement.
- will be printed as you submit it.

The Elections Office will not correct errors in spelling, punctuation, or grammar and will format any statement that does not conform to formatting rules to assure uniformity of appearance.

Formatting Rules:

The candidate statement must be typed in block paragraph form.

- No **bolding**, underlining, or *italics*.
- Text typed in ALL CAPS is not allowed.
- No vertical or indented lists or tables. Listed items must be formatted as a sentence.
- No bullets •, stars ★, or asterisks *.
- The statement will be no more than _____ words in length.

Estimated Costs to print Candidate Statement of Qualifications:

English \$ _____

The cost of printing the candidate statement is to be paid by the candidate. If the actual cost of printing differs from the estimate provided, any additional cost is the responsibility of the candidate.

I wish to have my statement translated and printed in the following languages in addition to English with the understanding that I will pay any additional cost incurred (check all that apply):

Spanish \$ _____

Tagalog \$ _____

Punjabi \$ _____

I wish to have my statement and check held until the close of filing (including extension period, if applicable). If I remain uncontested as a candidate for the office above, I request that the candidate statement not be published and the check returned.

I do not wish to file a Candidate Statement.

Total Amount Paid \$ _____

Check # _____

E-mail Address: _____
(Required)

Signature: _____ **Date:** _____

Candidate Statement of Qualifications Form

Please provide one copy printed on this form and provide one copy for office use.
The hard copy printed on this form is the official copy.

Name: _____ **Age:** _____
(Print name as you would like it to appear with your CSQ in the county voter information guide. Not required to match official ballot.) (Optional)

Occupation: _____
(Optional. Can be more descriptive than what will appear on the official ballot.)

Education and Qualifications: (Word count begins with your first word below.)

I submit this Candidate Statement of Qualifications for inclusion in the county voter information guide to be mailed to the registered voters of my district. I understand this statement will be printed as submitted and that changes to content are not permitted after the statement has been filed. However, I do have the option of withdrawing the statement during the period for filing nomination papers and until 5 PM of the next working day after the close of the nomination period. I understand formatting is at the discretion of the Placer County Elections Office to fit the county voter information guide size, rules, and constraints.

Signature: _____ **Date:** _____

Office: _____