2025 CHATSWORTH NEIGHBORHOOD COUNCIL SELECTION

CANDIDATE FILING FORM

All candidates appearing on the ballot must complete and submit this form by 11:59 p.m., Thursday, February 13, 2025. Any forms received, postmarked or emailed <u>after</u> that date or time will NOT be processed. There are no write-in candidates. Candidates must provide documentation and applicable identification (by email, virtually, postal mail or in person) to establish their stakeholder status by this deadline otherwise their filing will NOT be complete. <u>Every candidate must provide an acceptable photo ID such as a valid driver license</u> . For more information regarding this form and acceptable documentation visit website or contact vote@ChatsworthCouncil.org or call (818) 564-6819.		
CANDIDATE INFORMATION (PRINT	CLEARLY)	
First Name	Middle Name	Last Name
Date of Birth/Must be at least 18 years	of age	Phone Number
Mailing Address		ZIP
Email Address/Must print clearly		
Name to appear on ballot/Must print clearly. No professional designations allowed, eg: PhD, MSW, Esq., Rev., Dr.		
STAKEHOLDER CATEGORY		
I am a stakeholder in the Chatsworth Ne	ighborhood Council because:	
I am a resident within the boundaries of the Chatsworth Neighborhood Council and live at: Street Address/No P.O. Box accepted		
		ZIP:
\square I own real property within the boundaries of the Chatsworth Neighborhood Council at:		
Property Street Address or Assessor's P	Parcel Number/No P.O. Box accepted	ZIP:
I own a business or work within the Name of Business or Place of Work	boundaries of the Chatsworth Neighbo	orhood Council at:
Business Street Address/No P.O. Box a	ccepted	
		ZIP:
I board one or more horses within the boundaries of the Chatsworth Neighborhood Council at: Street Address/No P.O. Box accepted		
		ZIP:
 I am a Community Interest Stakeholder, defined as "an individual who is a member of or participates in a Community Organization within the boundaries" of the Chatsworth Neighborhood Council. See CNC Bylaws Article IV Stakeholder for Community Organization requirements. Name of Organization 		
Organization's Physical Street Address/	No P.O. Box accepted	
		ZIP:
MUST READ BEFORE SIGNING: This application will NOT be complete until candidate provides for inspection* and/or submits (1) *photo ID such as a current driver license, (2) *documentation supporting the one participant category checked above, (3) a passport-style head and shoulders photo as well as (4) a biographical campaign statement of up to 250 words to vote@ChatsworthCouncil.org. Candidate photos and statements will be posted on the CNC website. If you have any questions, please email us or call (818) 564-6819.		
I DECLARE UNDER PENALTY OF PER	RJURY THAT THE ABOVE STATEMENT	S ARE TRUE AND CORRECT:
Signature	Date	
P.O. Box 3395 Chatsworth	CA 91313 / Vote@ChatsworthCouncil.or	a / ChatsworthCouncil org