



City of
SANTA CLARITA



VOTE

2024



General Municipal Election Candidate Handbook

NOVEMBER 5, 2024

CANDIDATE HANDBOOK AND INFORMATION

This Candidate Handbook, together with the information and resources presented herein, is not intended to provide legal advice and is for general guidance only.

- Demographics & Statistics
- Economic Development Highlights
- Form of Government and Organizational Structure
- Council as a Legislative Body
- Current Council Priorities and Compensation
- Santa Clarita Elections
- Resources
- Q&A
- Attachments
 - District Map
 - Election Calendar
 - Filing Schedules for Candidates and their Controlled Committees for Local Office
 - Resolution Calling Election
 - Resolution Stating Candidate Statement Regulations
 - Acknowledgement and Receipt
 - Making the Leap to Public Service Pamphlet

DEMOGRAPHICS & STATISTICS

Incorporated December 15, 1987

From 39.417 to 73.6 square miles

Population – 228,673 (2020
CENSUS data)

Registered Voters

- District 1 = 22,541
- District 3 = 32,484

Community Amenities

- Community Parks
- Dog Parks
- Community Centers
- Libraries
- Theatre
- Recreational Complex
- Skate Park
- Community Pools
- Bike Park
- Class I and Class II Bike Paths – 108 miles
- Multi-use Trails – 110.9 miles
- Open Space – Over 13,000 acres



ECONOMIC DEVELOPMENT HIGHLIGHTS

Business Development

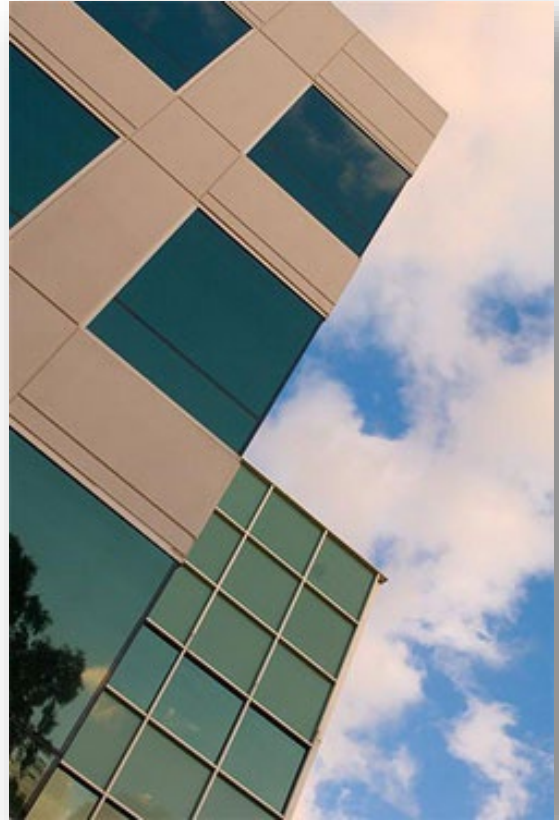
- Aerospace and Defense
- Advanced Manufacturing
- Information Technology
- Medical Devices and Bioscience
- Digital Media and Entertainment
- Corporate HQ and Professional Services

Film

- 63 Soundstages
- 10 Movie Ranches

Tourism

- 10 Hotels within the City





FORM OF GOVERNMENT

General Law City

Contract City – Fire and Public
Safety

Council-Manager

Five Councilmembers





ORGANIZATIONAL STRUCTURE





ORGANIZATIONAL STRUCTURE

A number of boards, commissions, and committees exist to advise the City Council.

Members, also known as Local Appointments, are appointed by the City Council generally following the installment of elected councilmembers.

- Planning Commission
- Parks, Recreation & Community Services Commission
- Arts Commission
- Open Space Preservation District Financial Accountability and Audit Panel
- Board of Library Trustees
- North County Transportation Coalition
- Greater Los Angeles County Vector Control Board of Trustees



CITY COUNCIL AS THE LEGISLATIVE BODY

Acts upon legislative matters concerning the City

- Ordinances
- Resolutions
- Contracts
- Other matters requiring policy decisions

Conducts the City's business at open and public meetings

Represents the City on state, regional, and local boards



MEETINGS OF THE CITY COUNCIL

Regular Meetings – Second and fourth Tuesday of each month at 6 p.m.

- [I-14.2 City Council Election, Summer and Holiday Recess Policy](#)

Special Meetings

Study Sessions

Committee Meetings

- [City Council Committee Appointments - 2024](#)





CONFERENCES, EVENTS AND COMMUNITY ENGAGEMENT

Ribbon Cuttings

Grand Openings

Charitable Events

Constituent Meetings

Conferences





COUNCIL PRIORITIES



Building and Creating Community
Community Engagement
Sustaining Public Infrastructure
Enhancing Economic Vitality
Community Beautification and Sustainability
Organizational Excellence
Public Safety

Santa Clarita 2025

COUNCIL PRIORITIES



Transfer of William S. Hart Regional Park

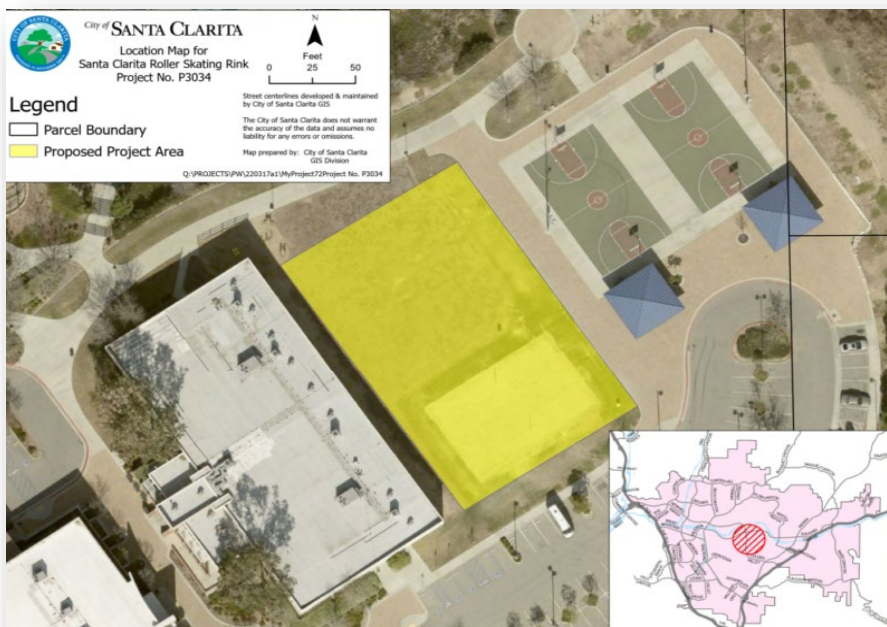




COUNCIL PRIORITIES



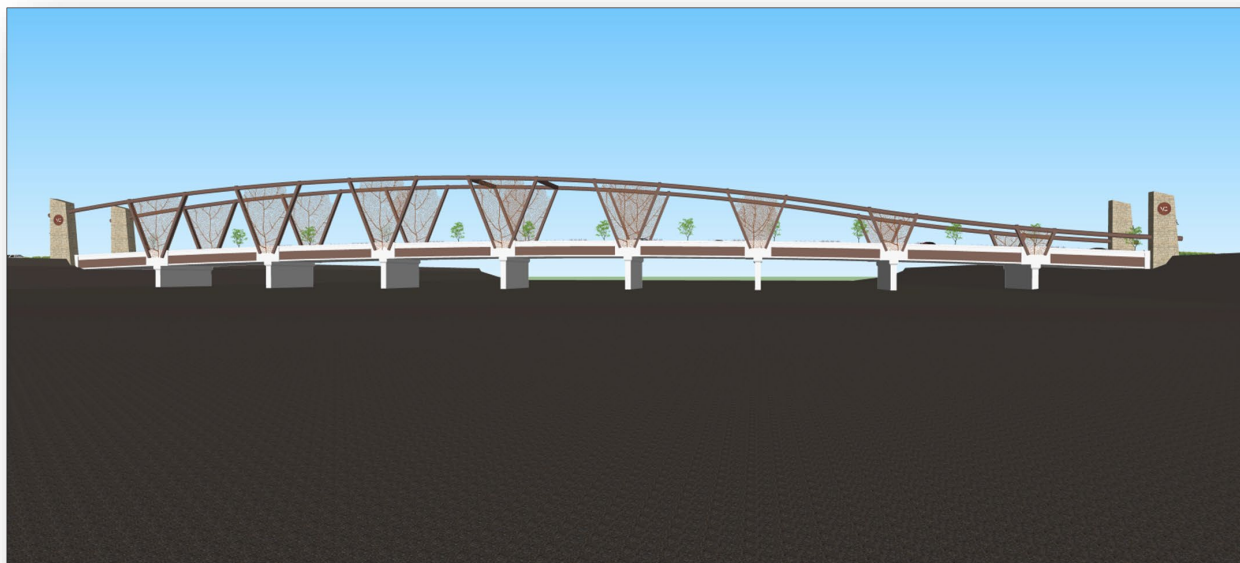
The Rink Sports Pavilion at the Santa Clarita Sports Complex



COUNCIL PRIORITIES



Vista Canyon Road Bridge





CITY COUNCIL COMPENSATION

Salary

Health Benefits—Health, Dental and Vision Insurance

Retirement Benefits

Life, Accidental Death & Dismemberment Insurance

Long-term Disability Insurance

GENERAL MUNICIPAL ELECTION

Consolidated Elections

Five-Member Council Is Elected By-District

Council Serves Staggered Four Year Terms

November 2024 seats:

- One seat in District 1
- One seat in District 3

November 2026 seats:

- One seat in District 2
- One seat in District 4
- One seat in District 5

Candidates and residents may use the [Residency Look-Up](#) to identify individual residential addresses by district.

A City of Santa Clarita Council District map is available on the [City's District Elections website](#), and a copy is provided with candidate papers.



COUNCIL CANDIDATE QUALIFICATIONS

Be a registered voter within an open district of the City of Santa Clarita at the time nomination papers are issued

Reside within the same district of the City of Santa Clarita the entire term of office

Do not accept incompatible public office or employment during term of office

NOMINATION PROCESS

Nomination Period Opens

- July 15 is the first day to pull candidate documents
- Appointment is required to pick up all candidate documents

Nomination Period Closes

- August 9 is the last day to file original candidate documents; or
- If an incumbent does not file, the nomination period is extended to August 14

An appointment is required for filing

There is no filing fee to run for City Council

FILE EARLY – PLEASE DO NOT WAIT UNTIL THE DEADLINE



CANDIDATE DOCUMENTS

Candidate Intention Statement FPPC Form 501

Candidate Intention Statement				Date Stamp	CALIFORNIA FORM 501
Check One: <input type="checkbox"/> Initial <input type="checkbox"/> Amendment (Explain) _____ _____				For Official Use Only	
1. Candidate Information:					
NAME OF CANDIDATE (Last, First Middle Initial)		DAYTIME TELEPHONE NUMBER () ()	FAX NUMBER (optional) () ()	EMAIL (optional)	
STREET ADDRESS		CITY	STATE	ZIP CODE	
OFFICE SOUGHT (POSITION TITLE)		AGENCY NAME		DISTRICT NUMBER, if applicable	<input type="checkbox"/> NON-PARTISAN OFFICE
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ (Name of Multi-County Jurisdiction)				PARTY PREFERENCE: (Check one box, if applicable.) <input type="checkbox"/> PRIMARY / GENERAL <input type="checkbox"/> SPECIAL / RUNOFF	
2. State Candidate Expenditure Limit Statement:					
(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)					
(Check one box) <input type="checkbox"/> I accept the voluntary expenditure ceiling for the election stated above. <input type="checkbox"/> I do not accept the voluntary expenditure ceiling for the election stated above. Amendment: <input type="radio"/> I did not exceed the expenditure ceiling in the primary or special election held on ____/____/____ and I accept the voluntary expenditure ceiling for the general or special run-off election.					

(Mark if applicable) <input type="checkbox"/> On, ____/____/____ I contributed personal funds in excess of the expenditure ceiling for the election stated above.					
3. Verification:					
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.					
Executed on _____ (month, day, year)		Signature _____ (Candidate)			
FPPC Form 501 (August/2011) FPPC Advice: advice@fppc.ca.gov (866/275-3777) www.fppc.ca.gov					



CANDIDATE DOCUMENTS

Nomination Paper

<p style="text-align: center;">Page <u>1</u> of <u>1</u></p> <p style="text-align: center;">FOR OFFICE USE ONLY</p> <hr/> <p style="text-align: center;">FOR CHECKERS</p> <p>TOTAL OK _____</p> <p>TOTAL X _____</p> <p>GRAND TOTAL _____</p> <hr/> <p>DATE _____ CHECKED BY _____</p>	<h2 style="text-align: center;">Nomination Paper</h2> <p style="text-align: center;">Non Partisan Offices (Elections Code Sections 10220.5, 10222, 10226 and 17100)</p> <div style="border: 2px solid black; padding: 10px; margin: 10px 0;"><p style="text-align: center;">OFFICIAL FILING FORM</p><hr/><p style="text-align: center;">_____ City Clerk or Deputy City Clerk</p><p>Date: _____</p></div> <p>I, the undersigned signer for _____, candidate or the _____ City of Santa Clarita _____ Name of Candidate nomination/election to the office of Councilmember _____</p> <p><input checked="" type="checkbox"/> Full Term, or <input type="checkbox"/> Unexpired term ending _____, to be voted for at the GENERAL ELECTION to be held on November 8, 2022 hereby assert as follows: I am a resident of _____ in _____ County and registered to vote at the address shown on this paper. I am not at this time a signer of any other nomination paper of any other candidate for the above-named office, or in case there are several places to be filled in the above-named office, I have not signed more nomination papers than there are places to be filled in the above-named office. My residence is correctly set forth after my signature hereto: Signer must personally affix his/her own printed name, signature and residence address.</p> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><th style="width: 10%;">PRECINCT <small>To be entered by Elections Official</small></th><th style="width: 40%;">NAME (AS REGISTERED)</th><th style="width: 40%;">RESIDENCE ADDRESS (AS REGISTERED - NO P.O. BOX) WITH CITY & ZIP</th><th style="width: 10%;">Verification <small>(To be entered by Elections Official)</small></th></tr><tr><td></td><td>Print <u>Mary Smith</u></td><td><u>100 N. Main St.</u></td><td></td></tr></table>	PRECINCT <small>To be entered by Elections Official</small>	NAME (AS REGISTERED)	RESIDENCE ADDRESS (AS REGISTERED - NO P.O. BOX) WITH CITY & ZIP	Verification <small>(To be entered by Elections Official)</small>		Print <u>Mary Smith</u>	<u>100 N. Main St.</u>	
PRECINCT <small>To be entered by Elections Official</small>	NAME (AS REGISTERED)	RESIDENCE ADDRESS (AS REGISTERED - NO P.O. BOX) WITH CITY & ZIP	Verification <small>(To be entered by Elections Official)</small>						
	Print <u>Mary Smith</u>	<u>100 N. Main St.</u>							



CANDIDATE DOCUMENTS

Affidavit of Nominee and Oath or Affirmation of Allegiance

OFFICIAL FILING FORM																										
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;">Attest: _____ City Clerk</div><div style="width: 40%;">Date: _____</div></div>		<p style="text-align: center;">AFFIDAVIT OF NOMINEE AND OATH OR AFFIRMATION OF ALLEGIANCE</p> <p style="text-align: center;">(Elections Code §§ 20, 200, 10223, 10226 CA Constitution Article xx, Section 3)</p>																								
<p>I, _____ hereby declare myself a candidate for nomination to the office of _____ To be voted for at the 2020 GENERAL ELECTION to be held on November 03, 2020.</p>																										
<p>I request my name and ballot designation to appear on the ballot as follows:</p> <table style="width: 100%;"><tr><td style="width: 60%; text-align: center;">_____ Print Your Name for Use on the Ballot</td><td style="width: 40%; text-align: center;">Candidate initials below if NO ballot designation is preferred: _____</td></tr><tr><td style="text-align: center;">_____ Print Ballot Designation Requested</td><td></td></tr></table>			_____ Print Your Name for Use on the Ballot	Candidate initials below if NO ballot designation is preferred: _____	_____ Print Ballot Designation Requested																					
_____ Print Your Name for Use on the Ballot	Candidate initials below if NO ballot designation is preferred: _____																									
_____ Print Ballot Designation Requested																										
<p><input type="checkbox"/> → I have a character-based name I would like to use instead of a phonetic transliteration. (Please complete Character-Based Name Form.)</p> <p><small>Print your principal profession, vocation or occupation in 3 words or less. If you hold an elective office, you may use the elective office title or use the word "Incumbent". See written instructions provided for restrictions and examples.</small></p> <p>IMPORTANT NOTE: A ballot designation is optional. If one is requested, a completed BALLOT DESIGNATION WORKSHEET must be submitted. If no ballot designation is requested, write "NONE" and initial in the box. (Elections Code §§ 13107, 13107.3)</p>																										
<table style="width: 100%;"><tr><td colspan="2">Mailing Address: _____</td><td>Apt or Unit #: _____</td></tr><tr><td>City: _____</td><td>State: _____</td><td>Zip Code: _____</td></tr><tr><td colspan="2">Residence Address (Required): _____</td><td>Apt or Unit #: _____</td></tr><tr><td>City: _____</td><td>State: _____</td><td>Zip Code: _____</td></tr><tr><td colspan="2">Business Address: _____</td><td>Apt or Unit #: _____</td></tr><tr><td>City: _____</td><td>State: _____</td><td>Zip Code: _____</td></tr><tr><td>Telephone Numbers: Day () _____</td><td>Evening () _____</td><td>Fax () _____</td></tr><tr><td>Email: _____</td><td colspan="2">Website: _____</td></tr></table>			Mailing Address: _____		Apt or Unit #: _____	City: _____	State: _____	Zip Code: _____	Residence Address (Required): _____		Apt or Unit #: _____	City: _____	State: _____	Zip Code: _____	Business Address: _____		Apt or Unit #: _____	City: _____	State: _____	Zip Code: _____	Telephone Numbers: Day () _____	Evening () _____	Fax () _____	Email: _____	Website: _____	
Mailing Address: _____		Apt or Unit #: _____																								
City: _____	State: _____	Zip Code: _____																								
Residence Address (Required): _____		Apt or Unit #: _____																								
City: _____	State: _____	Zip Code: _____																								
Business Address: _____		Apt or Unit #: _____																								
City: _____	State: _____	Zip Code: _____																								
Telephone Numbers: Day () _____	Evening () _____	Fax () _____																								
Email: _____	Website: _____																									



CANDIDATE DOCUMENTS

Statement of Economic Interests - FPPC Form 700



STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*

Division, Board, Department, District, if applicable

Your Position

► If filing for multiple positions, list below or on an attachment. *(Do not use acronyms)*

Agency: Position:

2. Jurisdiction of Office *(Check at least one box)*

☐ State

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of

☐ Other

3. Type of Statement *(Check at least one box)*

☐ **Annual:** The period covered is January 1, **2021**, through
December 31, **2021**.

-or-

The period covered is / / through
December 31, **2021**.

☐ **Assuming Office:** Date assumed / /

☐ **Leaving Office:** Date Left / /
(Check one circle.)

☐ The period covered is January 1, **2021**, through the date of
leaving office.

-or-



☐ The period covered is / / through
the date of leaving office.

☐ **Candidate:** Date of Election and office sought, if different than Part 1:



CANDIDATE DOCUMENTS

Transliteration Form



LOS ANGELES COUNTY
REGISTRAR-RECORDER/COUNTY CLERK

DEAN C. LOGAN
Registrar-Recorder/County Clerk

TRANSLITERATION FORM

_____, candidate for nomination to the _____ City of Santa Clarita _____ office of
Councilmember _____

_____ agree as indicated below:

CHECK ONE:

☐ I will accept the transliteration of my name provided by the Los Angeles County Registrar-Recorder/County Clerk in Armenian, Bengali, Burmese, Cambodian / Khmer, Chinese, Farsi, Gujarati, Hindi, Japanese, Korean, Mongolian, Russian, Telugu, and Thai.

OR

☐ I am submitting an attachment of the transliteration(s) for the language(s) below.
I will accept the transliteration of my name provided by the Los Angeles County Registrar-Recorder/County Clerk for any language not submitted.


<u>Languages</u>	<u>Name Transliteration</u>	<u>Languages</u>	<u>Name Transliteration</u>
<input type="checkbox"/> Armenian:		<input type="checkbox"/> Japanese:	
<input type="checkbox"/> Bengali:		<input type="checkbox"/> Korean:	
<input type="checkbox"/> Burmese:		<input type="checkbox"/> Mongolian:	
<input type="checkbox"/> Cambodian/Khmer:		<input type="checkbox"/> Russian:	
<input type="checkbox"/> Chinese:		<input type="checkbox"/> Telugu:	
<input type="checkbox"/> Farsi:		<input type="checkbox"/> Thai:	
<input type="checkbox"/> Gujarati:			
<input type="checkbox"/> Hindi:			

GENDER:



CANDIDATE DOCUMENTS

Ballot Designation Worksheet

		California Secretary of State		
		BALLOT DESIGNATION WORKSHEET		
		November 8, 2022, General Election (Elections Code §§ 8168, 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 DOCUMENT.				
Candidate Information	1	Candidate Name:	Gender (optional, for translation use only):	
		Office:	Email:	
		Home Address:		
		Mailing Address:		
		Business Address:		
		Phone Number(s) Business:	Home/Mobile:	Fax:
Attorney Information	2	Attorney Name (or other person authorized to act on your behalf):		
		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. NOTE: A candidate for the office of Representative in Congress, Member of the State Board of Equalization, State Senator, or Member of the Assembly shall not choose the word "incumbent" as a designation to appear on the ballot.				
(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:		



CANDIDATE DOCUMENTS

Candidate Statement Form

- Candidate Statements are optional
- Candidate Statement fees are determined by the Los Angeles County RR/CC Elections Division
- Additional regulations adopted by City Council Resolution No. 24-30

CANDIDATE STATEMENT INFORMATION AND GUIDELINES

(Elections Code Sections 13307, 13308, 13311 and 13313)

GENERAL INFORMATION: Filing of a statement is optional and applies to local nonpartisan offices.

FILING PERIOD: Statement must be filed no later than the close of business hours on the last day of the candidate nomination period.

WITHDRAWAL: A candidate statement cannot be changed or revised once it is filed. A candidate statement may be withdrawn by 5 p.m. of the next business day after the last day to file the statement.

CONTENTS: Statement may include candidate's age and occupation and a 200 words description of the candidate's education and qualifications. Some jurisdictions increase the word limit to 400 words.

FORMAT/WORD COUNT: Please refer to the Candidate Handbook (Section 1 Chapter 3) for detailed information regarding format and word counting guidelines.

RESTRICTIONS: The candidate statement shall not include the party affiliation of the candidate nor reference any membership or activity in political organizations. Please refer to the Candidate Handbook (Section 1 Chapter 3) for more information.

IMPORTANT NOTICE - PLEASE READ

PUBLIC EXAMINATION PERIOD: Candidate statements shall be confidential until the close of the nomination period. Once the nomination period closes, the statements are open to public examination for a ten (10) calendar day period. During the examination period, candidate listings, candidate statements, candidate names and ballot designations (or occupation) on ballot shall be open to public examination. Any person may file a writ of mandate or an injunction to challenge and possibly amend any or all of the material/data (E.C. 13313). If the filing period is extended for a particular office, the examination period for that office shall be adjusted. A fee may be charged to any candidate/person obtaining a copy of the material.

CANDIDATES FILING IN SHARED DISTRICTS: Your candidate statement must be filed with the county elections official in each county where you wish to have your statement printed (e.g., if you wish to have your statement printed in both Los Angeles and Ventura Counties, then you must submit one (1) copy of your statement and the appropriate fee to each county where you intend to have your statement appear in the Official Sample Ballot Booklet). The elections official will not forward your candidate statement or estimated shared cost to neighboring counties.

ESTIMATED COST

The estimate is just an approximation of the actual cost that varies from one election to another election and may be significantly more or less than the estimate, depending on number of voter registration, the length and/or format of the statement submitted, and printing cost. Accordingly, the elections official is not bound by the estimate and may, on a pro rata basis, bill the candidate for additional actual expense to or refund any excess paid depending on the final actual cost. In the event of underpayment, the elections official may require the candidate pay to the balance of the cost incurred. In the event of overpayment,



CANDIDATE DOCUMENTS

Code of Fair Campaign Practices

- Optional

CODE OF FAIR CAMPAIGN PRACTICES

(Division 20, Chapter 5, Elections Code.)
Chapter 5. Fair Campaign Practices

Article 1. General Intent

The Legislature declares that the purpose of this chapter is to encourage every candidate for public office in this state to subscribe to the Code of Fair Campaign Practices. (*Elections Code § 20400*)

It is the ultimate intent of the Legislature that every candidate for public office in this state who subscribes to the Code of Fair Campaign Practices will follow the basic principles of decency, honesty, and fair play in order that, after vigorously contested, but fairly conducted campaigns, the citizens of this state may exercise their constitutional right to vote, free from dishonest and unethical practices which tend to prevent the full and free expression of the will of the voters.

The purpose in creating the Code of Fair Campaign Practices is to give voters guidelines in determining fair play and to encourage candidates to discuss issues instead of untruths or distortions. (*Election Code enacted by Stats. 1994, Ch. 920, Sec. 2.*)

Article 2. Definitions

20420. As used in this Chapter, "Code" means the Code of Fair Campaign Practices. (*Elections Code § 20420*)

Article 3. Code of Fair Campaign Practices

At the time an individual is issued his or her declaration of candidacy, nomination papers, or any other paper evidencing an intention to be a candidate for public office, the elections official shall give the individual a blank form of the code and a copy of this chapter. The elections official shall inform each candidate for public office that subscription to the code is voluntary. (*Elections Code § 20440*)



CANDIDATE DOCUMENTS

Literature and Mass Mailing Requirements

LITERATURE REQUIREMENTS

§ 16, Elections Code A copy of Section 84305 of the Government Code shall be provided by the elections official to each candidate or his or her agent at the time of filing the declaration of candidacy and to the proponents of a local initiative or referendum at the time of filing the petitions.

MASS MAILING REQUIREMENTS

§ 84305, Government Code (a) (1) Except as provided in subdivision (b) a candidate, candidate controlled committee established for an elective office for the controlling candidate, or political party committee shall not send a mass mailing unless the name, street address, and city of the candidate or committee are shown on the outside of each piece of mail in the mass mailing and on at least one of the inserts included within each piece of mail of the mailing in no less than 6-point type that is in a color or print that contrasts with the background so as to be easily legible. A post office box may be stated in lieu of a street address if the candidate's, candidate controlled committee established for an elective office for the controlling candidate's, or political party committee's address is a matter of public record with the Secretary of State.

(2) Except as provided in subdivision (b), a committee, other than a candidate controlled committee established for an elective office for the controlling candidate or a political party committee, shall not send a mass mailing that is not required to include a disclosure pursuant to Section 84502 unless the name, street address, and city of the committee is shown on the outside of each piece of mail in the mass mailing and on at least one of the inserts included within each piece of mail of the mailing in no less than 6-point type that is in a color or print that contrasts with the background so as to be easily legible. A post office box may be stated in lieu of a street address if the committee's address is a matter of public record with the Secretary of State.



CANDIDATE DOCUMENTS

IRS Request for Taxpayer Identification Number and Certification (W-9 Form)

- Required if depositing funds to the City for a Candidate Statement

Form W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service		Request for Taxpayer Identification Number and Certification ► Go to www.irs.gov/FormW9 for instructions and the latest information.		Give Form to the requester. Do not send to the IRS.
1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.				
2 Business name/disregarded entity name, if different from above				
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	<input type="checkbox"/> Individual/sole proprietor or single-member LLC			
	<input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate			
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►			
	<input type="checkbox"/> Other (see instructions) ►			
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) <input type="text"/> Exemption from FATCA reporting code (if any) <input type="text"/> <small>(Applies to accounts maintained outside the U.S.)</small>				
5 Address (number, street, and apt. or suite no.) See instructions.			Requester's name and address (optional)	
6 City, state, and ZIP code				
7 List account number(s) here (optional)				
Part I Taxpayer Identification Number (TIN)				
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.				
Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.				
			Social security number	
			<input type="text"/> - <input type="text"/> - <input type="text"/>	
			or	
			Employer identification number	
			<input type="text"/> - <input type="text"/>	



CANDIDATE FORMS

Political Reform Act – Fair Political Practices Commission (FPPC) [Forms](#)

- Recipient Committee Form 410
- Contribution Forms 460/470/497

**Statement of Organization
Recipient Committee**

Statement Type: ☐ Initial ☐ Amendment ☐ Termination - See Part 5

☐ Not yet qualified or ☐ Date qualification threshold met

Date qualification threshold met: _____ Date of termination: _____

Date Stamp: _____

CALIFORNIA FORM 410
For Official Use Only

1. Committee Information I.D. Number _____

NAME OF COMMITTEE: _____

STREET ADDRESS (NO P.O. BOX): _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

2. Treasurer and Other Principal Officers

NAME OF TREASURER: _____

STREET ADDRESS (NO P.O. BOX): _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

NAME OF ASSISTANT TREASURER, IF ANY: _____

STREET ADDRESS (NO P.O. BOX): _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

NAME OF PRINCIPAL OFFICER(S): _____

STREET ADDRESS (NO P.O. BOX): _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

Initial and maintenance checks: _____

**Statement of Organization
Candidate/Committee**

Statement covers period from _____ through _____

Date of election if applicable: (Month, Day, Year) _____

Date Stamp: _____

CALIFORNIA FORM 460
Page _____ of _____
For Official Use Only

EE INSTRUCTIONS ON REVERSE

Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

☐ Officeholder, Candidate Controlled Committee ☐ Primary Formed Ballot Measure Committee

☐ State Candidate Election Committee ☐ Recall ☐ Controlled ☐ Sponsored (Also file a Form 410 Termination) ☐ Quarterly Statement ☐ Special One-Year Report

☐ General Purpose Committee ☐ Primary Formed Candidate/Officeholder Committee (Also Complete Part 3)

☐ Small Contributor Committee ☐ Political Party/Central Committee

Committee Information I.D. NUMBER _____

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): _____

STREET ADDRESS (NO P.O. BOX): _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX: _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

OPTIONAL FAX / E-MAIL ADDRESS: _____

Treasurer(s)

NAME OF TREASURER: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

NAME OF ASSISTANT TREASURER, IF ANY: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

OPTIONAL FAX / E-MAIL ADDRESS: _____

**Statement of Organization
Contribution**

NAME OF FILER: _____

AREA CODE/PHONE NUMBER: _____ I.D. NUMBER (if applicable): _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

Date of This Filing: _____

Report No.: _____

☐ Amendment to Report No. _____ (explain below)

No. of Pages: _____

Date Stamp: _____

CALIFORNIA FORM 497
For Official Use Only

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan Provide internal code: _____
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan Provide internal code: _____
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan Provide internal code: _____

* Contributor Codes
IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other (e.g., business entity)

CAMPAIGN CONTRIBUTIONS

FAIR POLITICAL PRACTICES COMMISSION REGULATIONS

Updated FPPC Contribution Rules for the Levine Act (Pay-to-Play Limits and Prohibitions (Government Code Section 84308)

- Officials are prohibited from accepting, soliciting, or directing a contribution exceeding \$250 from a party or participant for 12 months after the final decision of a proceeding.
- Filing Schedule is available on the FPPC website [Filing Deadline Calendar – FPPC](#) and included with candidate documents.

CITY CAMPAIGN CONTRIBUTION REGULATIONS

Campaign Limits – Santa Clarita Municipal Code Chapter 7.02.030

- No anonymous donations
- Itemize donations of \$100 or more
- Include name and address of contributor and contributor's employer
- Contribution limit of \$1,000 per contributor per election

Campaign Disclosure – Santa Clarita Municipal Code Chapter 7.02.040

- Electronic Filing

SIGN REGULATIONS

The Santa Clarita Municipal Code governs signage within the City of Santa Clarita

Temporary Sign— Santa Clarita Municipal Code Chapter 17.11.020

- Any sign constructed of cloth, canvas, light fabric, cardboard, wallboard, wood or other light materials, with or without frames, intended to be displayed for a limited period of time.

Noncommercial Sign – Santa Clarita Municipal Code Chapter 17.11.020

- A sign that does not name, advertise or call attention to a commercial or industrial business, commodity, product, good, service or other commercial or industrial activity for a commercial or industrial purpose.

Regulations for temporary noncommercial signs vary depending upon whether the signage is located on private property or on public property.

Public Property – Santa Clarita Municipal Code Chapter 11.12

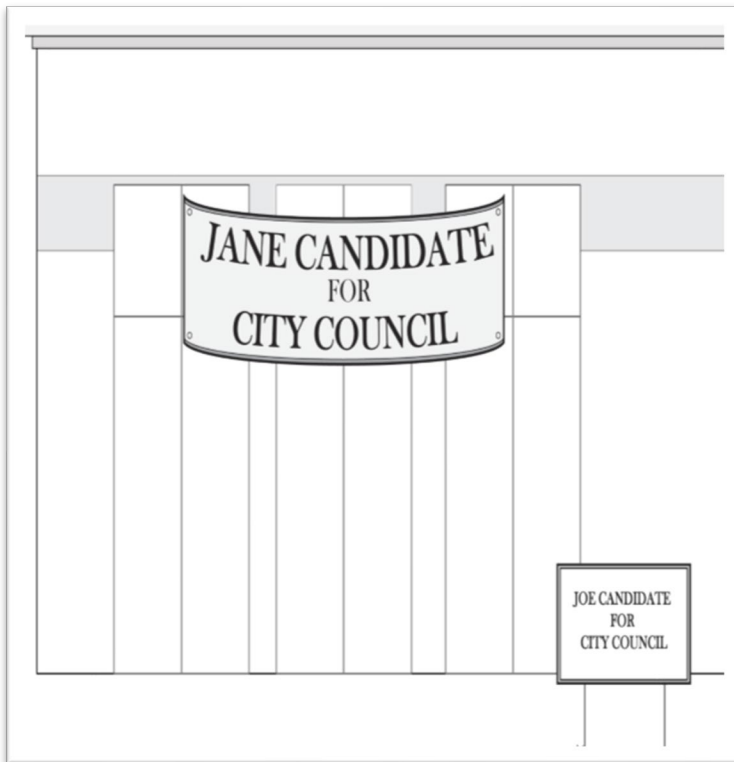
- Temporary noncommercial signage **may not be placed on public property or in public rights-of-way**. Such signs are subject to removal by the City. Once removed, the signs can either be retrieved (subject to a fine) or the signs can be stored until after the election (and retrieved at that time without a fine).

Private Property – Santa Clarita Municipal Code Chapter 17.51.080

- Temporary freestanding noncommercial signs may be placed on private property, provided that such temporary noncommercial signage is in compliance with the code with regard to placement, size, quantity and design. Those standards vary depending upon whether the private property is commercial or residential. Noncommercial signs on private property that do not conform to the requirements of the SCMC will not be removed by the City, but will subject the property owners to code enforcement action. **Candidates are encouraged to obtain property owner permission prior to installing any signage.**



SIGN REGULATIONS (CONT'D)

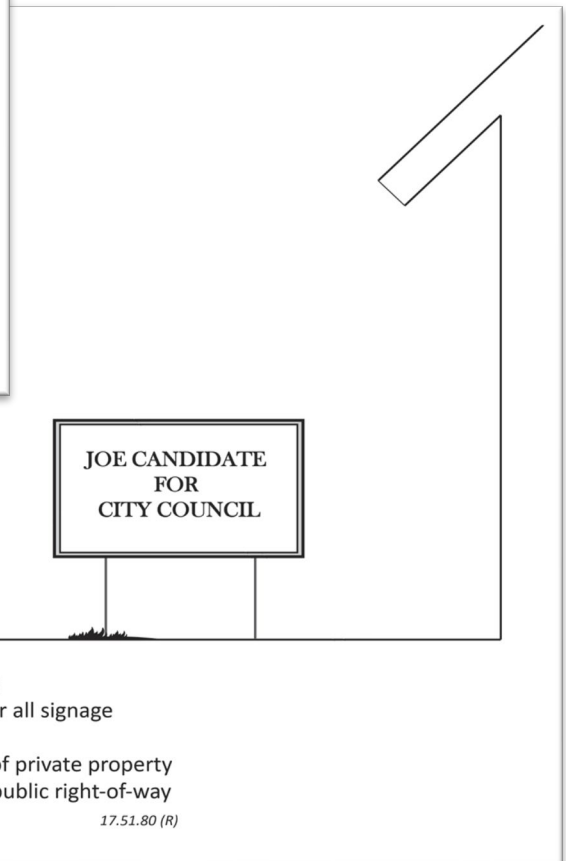


C, MX, PI, I and OS Zones

- 32 square feet per sign;
- 200 square feet total for all signage

• Location

- Front or side yard of private property
 - Prohibited on any public right-of-way
- 17.51.080(S)



Zone

- 32 square feet per sign;
- 100 square feet total for all signage

Location

- Front or side yard of private property
- Prohibited on any public right-of-way

17.51.80 (R)

ADVERTISING REGULATIONS

Political Reform Act – Fair Political Practices Commission

- California Code of Regulations – www.fppc.ca.gov/learn/campaign-advertising-requirement-restrictions.html

[Political Reform Chapter 7 – City of Santa Clarita](#)

- Santa Clarita Municipal Code

[Interference with City Property or Notices Chapter 11.12 – City of Santa Clarita](#)

- Santa Clarita Municipal Code

[Property Development Standards Chapter 17.51.080\(S\) – City of Santa Clarita](#)

- Santa Clarita Municipal Code

Literature and Mass Mailing Requirements – California Codes



WHAT CAN YOU DO NOW?

Attend or watch City Council and/or Commission Meetings

Visit the City's Website

Review the Santa Clarita Map to ensure you are soliciting signatures from residents *within the City of Santa Clarita and the district in which you are running*

Understand Fair Political Practices Regulations and Reporting Responsibilities

Make an appointment to file Candidate Documents

RESOURCES

As a Candidate, you are encouraged to contact county, state, and federal offices regarding elections, tax, and Political Reform Act regulations through the information provided herein or your own resources.

City of Santa Clarita – www.santaclarita.gov

- Local Elections Official: City Clerk (661) 255-4391
- <https://santaclarita.gov/city-clerk/elections/>
- [Santa Clarita Municipal Code](#)
- [Campaign Disclosure Filing](#)
- Sign Ordinance Questions: Justin Hillemann (661) 255-4351

Los Angeles County – www.lavote.gov/

- Register to Vote
- Voter Information for Campaigns
- [Candidate Handbook and Resource Guide](#)

Fair Political Practices Commission – (866) 275-3772 or www.fppc.ca.gov/

- Conflict of Interest Disclosure and Disqualifications
- Campaign Disclosure
 - Financial Reporting
 - Use of Campaign Funds
- [Candidate Toolkit](#)
- [Candidate and Treasurer Training Webinars](#)
- [Levine Act-Changes to Section 84308](#)

State Franchise Tax Board – (800) 852-5711

- Committee Tax Status
- Tax Deductible Contributions



RESOURCES (CONT'D)

Secretary of State - www.sos.ca.gov

- Political Reform Division - (916) 653-6814
 - Campaign Committee ID Number
- Elections Division – (916) 653-6814
 - State Elections Code Questions

Internal Revenue Service – (800) 829-1040

- Federal Taxpayer ID

Attorney General – (800) 952-5225

- Brown Act

Institute for Local Government – www.ca-ilg.org

- [*How Can I Determine the Impact of Public Service Ethics Laws on Me?*](#)
- [*What to Know about Ethics Laws Before You are Elected or Appointed*](#)