



**AUTHORIZATION TO PICK-UP AND/OR FILE
CANDIDATE NOMINATION DOCUMENTS**

I, _____, candidate for the office
CANDIDATE'S NAME — PLEASE PRINT

of Burbank Board of Education - District _____ hereby authorize

OFFICE TITLE

Joseph Emilio Martinez

AGENT'S NAME

(303) 503-4229

AGENT'S PHONE NUMBER

to receive and/or file the following nomination documents: Please check applicable forms (☒)

☒ Signature in Lieu of Filing Fee Petitions

☒ Declaration of Candidacy

☒ Candidate Statement

☒ Ballot Designation Worksheet

☒ Nominating Petitions

☐ Other: _____ (Specify)

☒ Declaration of Intention

**I am aware that the Nomination documents must be properly executed and delivered to the County of Los Angeles
Registrar-Recorder/County Clerk's Office no later than 5:00 p.m. on the last day to file such documents.**

I request that my name be placed upon the ballot as follows: (Please print)

FIRST NAME

MIDDLE NAME OR INITIAL

LAST NAME

My residence address is:

STREET ADDRESS

CITY

STATE

ZIP CODE

My telephone numbers are: () _____
DAYTIME

() _____
EVENING

() _____
FAX

My internet addresses are:

WEBSITE

E-MAIL

I would like the following **information** to be used for purposes of listings prepared and
issued to the news media and/or the public. (If none given, the above information will be listed.)

INFORMATION FOR PUBLICATION

STREET ADDRESS

CITY

STATE

ZIP CODE

DAYTIME PHONE: () _____ EVENING PHONE: () _____

FAX: () _____

WEBSITE: _____ E-MAIL: _____

CANDIDATE SIGNATURE

DATE