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1. PORSCHE MIDDLETON
   Candidate's Name

2. CITY COUNCIL DISTRICT 5
   Office Sought (including District, Ward, Division or Trustee Area Number, if applicable)

3. 400 CAPITIOL MALL STE 1545 SACRAMENTO 95814
   Mailing Address ***Street*** ***City or Town*** ***Zip***

4. 916-245-0318
   Day Telephone Number ***Evening Telephone Number***

5. TEAM@PORSCHEMIDDLETON.COM
   E-mail Address

6. PORSCHEMIDDLETON.COM
   Website Address

[redacted] 8/3/2022
Signature ***Date***

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