

LPF FORM 2 Initial Application for Public Financing

Please type or print clearly in ink.

Candidate Name:	
District Office Being Sought:	Date of Election: Tuesday, November 3, 2020
Campaign Mailing Address:	
Phone: (Number at which candidate can be reached during business hours)	Fax: Candidate's Campaign Email:
Name of Controlled Committee	Campaign ID Number:
	Campaign EIN No.
Name of Campaign Treasurer:	Treasurer Phone:
	Treasurer Email:
Name and Address of Financial Institution	Campaign Bank Account Number

This form continues on the next two pages.

I hereby apply for public financing and certify that the following information is true and correct:

1. I have executed and timely filed OCRA Form No. 301 accepting voluntary expenditure ceilings.
2. I have executed and timely filed a “Statement of Acceptance or Rejection of Public Financing” (LPF Form 1) and have agreed to accept public financing for the November 3, 2020, election.
3. I am certified to appear on the ballot for the election for which public matching funds are sought.
4. I have received campaign contributions from donors located within the City of Oakland totaling at least 5% of the voluntary spending limit for the office being sought, exclusive of any loans or contributions from my personal funds. **Copies of the checks received, or copies of online contribution records, to meet this 5% threshold are attached.**
5. I have made qualified campaign expenditures in an aggregate amount of at least 5% of the voluntary spending limit for the office being sought. **Copies of the invoices and/or checks evidencing proof of meeting this 5% spending threshold are attached.**
6. I have not made any contribution or loan to my campaign from any personal funds in an amount exceeding 10% of the voluntary spending limit for the office being sought.
7. I or my campaign treasurer or designee has attended a training program conducted or sponsored by the Public Ethics Commission.

I understand and agree that to receive public financing I must be opposed by a candidate for the same office.

I understand and agree that as a condition of receiving public financing I must timely file, and completely and accurately execute, all pre-election campaign statements that are due at the time public financing is payable as well as timely file, and completely and accurately execute, all post-election campaign statements for the election in which I receive public financing.

I understand and agree that I must return surplus funds to the Public Ethics Commission no later than January 31 of the year following the election.

I understand and agree to all conditions of and requirements for the use of public financing set forth in this Application, the Act and any regulations adopted thereunder. I understand and agree to submit to reasonable audits deemed necessary by the Oakland Public Ethics Commission or other civil authorities as specified by the Limited Public Financing Act.

By my signature below, I certify that:

1. I have read and understand the requirements and conditions set forth in this Application and the Oakland Limited Public Financing Act and understand that those requirements and conditions must be satisfied before, during and after I receive public financing.
2. I have not made and I agree to not make any expenditures in excess of the voluntary spending limits of Oakland Municipal Code Section 3.12.200. (This requirement shall not apply if the voluntary spending limits have been lifted pursuant to Oakland Municipal Code Section 3.12.220.)
3. The attached copies of documents are true and accurate copies of the original. I understand that they will be used by the Public Ethics Commission staff to determine my eligibility to apply for and receive public financing.

CANDIDATE’S DECLARATION

I declare under penalty of perjury under the laws of the State of California that my campaign committee and I have complied with all applicable contribution and expenditure limitations under the Oakland Campaign Reform Act at all times in which those limitations apply to my candidacy for the office in contest and I further declare that the representations set forth above are true and correct.

Date: _____

Candidate’s Signature

Print or Type Candidate’s Name

This form must be submitted to the Public Ethics Commission at:

Oakland Public Ethics Commission
One Frank H. Ogawa Plaza (City Hall), Room
104
Oakland, CA 94612
(510) 238-3593
(510) 238-3315 (fax)
www.oaklandca.gov/pec
ethicscommission@oaklandca.gov