CLARK COUNTY DEMOCRATIC CENTRAL COMMITTEE P.O. BOX 179 VANCOUVER, WASHINGTON 98666

PRECINCT COMMITTEE OFFICER APPLICATION

Precinct #	Appointed	Acting	Legislative District		
Name of PCO _					
(Print full name as it appears on Voter Registration)					
Address				_	
City		State	Zip	_	
Phone (Home) _		Phone (Work)			
Cell Phone					
E-Mail Address					
 Declare yours Be registered one in which Be nominated Be approved Pledge to use Democratic I Committees Understand the PCO position 	self to be a DEMOCR to vote in the precinct you live (acting). I and elected by your sto vote at CCDCC by your status as a PCO, Party activities, and suin conjunction with the nat failure to conform in.	AT. t in which you will Legislative District the Clark County I and your VoteBui pport of candidates e State Central Cor to these agreement	Democratic Central Committee at a regulater access, only for Party ID of voters, and issues endorsed or recommended by mmittee direction and strategy. Is can cause loss of access to VoteBuilde	lar meeting. promotion of by the LD or County er &/or revocation of	
Your term of offi of that year.	ce will extend through	h the next statewide	e general election in an even-numbered y	year and end Nov 30	
Applicant Signat	ure		Date		
		(D. d.)	Har Oak		
		` •	Use Only)		
Elected by(Name of Legislative I	District Committee	Date		
Approved by CC	DCC(Signature of 0	Certifying Officer)	Date		