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|  | Pierce County Democratic Party  Our goal is to have every precinct represented by a PCO. Therefore, it is essential that we have volunteers step up to serve as appointed PCOs in vacant or precincts in which they reside, or substitute PCOs in a neighboring precinct. |

## Application for Democratic Precinct Committee Officer (PCO)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  |  | | |  | Date: |  | |
|  | Last | First | | | M.I. |  |  | |
| Address: |  | | | | | | |  |
|  | Street Address | | | | | | | Apartment/Unit # |
|  |  | | | |  | | |  |
|  | City | | | | State | | | ZIP Code |
| Phone: |  | | Email |  | | | | |

PDC Note: If you expect to contribute over $100 to the Pierce County Democrats in a calendar year, please provide your occupation and employer so we can fulfill our Public Disclosure reporting requirements.

|  |  |  |  |
| --- | --- | --- | --- |
| Occupation |  | | |
| Employer |  | Employer City |  |

## I hereby make application to be appointed as a Democratic Precinct Committee Officer in:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Legislative District: | |  | Precinct: |  |
| (Check one) |  | | | | |
| Fulfilling the unexpired term of (previous PCO's name): | | | | | |
| Filling an open seat | | | | | |
|  | | | | | |

I agree that my name and contact information become a matter of public record as being a democrat representing the Democrats of said precinct as a member of the Pierce County Democratic Central Committee.

*I am willing to serve as a Democratic Precinct Committee Officer (PCO) or [Acting] PC until the end of the current biannual term. I understand that my duties include: Get-out-the-vote activities and new voter registration.*

\*I am a registered voter and (check one) Do\_\_\_\_\_ Do Not\_\_\_\_\_\_\_ Reside in this precinct.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |
| This application is submitted and recommended by: | | | |
| District Chair Signature: |  | Date: |  |
| District Chair Printed Name: |  |
| County Chair Signature: |  | Date: |  |
| County Chair Printed Name: |  |

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|  |
| ***SUBMIT TO LD CHAIR OR SEND TO: Pierce County Democrats, 3049 S 36th St, Suite 206, Tacoma, WA 98409*** |