

ALTERNATE MEMBER FORM 2020



This form is to be completed by Elected, Ex-Officio, and Associate members who want to appoint an Alternate. This document needs to be signed by both the VCDCC Member and the Alternate. **This form and payment shall be presented a minimum of 30 minutes prior to the first order of business in a meeting.** Please include payment of a \$5 fee for appointing an Alternate. The Member (Elected, Ex-Officio, or Associate) Form and Dues must also be paid before an Alternate Form can be accepted and valid. Return completed form to the VCDCC Controller, PO Box 1587, Camarillo, CA 93011, vcdcc.controller@gmail.com & vcdcc.secretary@gmail.com Please print.

Date: _____

I _____, am an Elected, Ex-Officio, Associate, or CLUB representative (circle one) member of the

Ventura County Democratic Central Committee. I hereby appoint _____ who is a registered Democrat residing in the same District, to serve as my Alternate when I am not in attendance, with all the same rights and privileges as set forth in the Bylaws.

Member Signature: _____

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Name of Alternate (print): _____

Alternate Signature: _____

Registration Address: _____

City: _____ **State:** _____ **Zip:** _____

Mailing Address (if different): _____

City: _____ **State:** _____ **Zip:** _____

Districts:
Congressional: _____ **State Senate:** _____ **State Assembly:** _____ **Supervisory:** _____

Email Address: _____

Home Phone: _____ **Work Phone:** _____

Cell Phone: _____

Occupation: _____ **Employer:** _____

Skills: _____

Organizational Affiliations: _____

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VCDCC Use: DOB _____

Verified Democrat? Yes / No

Fee Paid Date **Amount** **Treasurer**