

MARICOPA COUNTY REPUBLICAN COMMITTEE

15440 N 35th Ave, Suite 4, Phoenix, AZ 85053

602-957-3999 -- Call for Fax or Email signed copy to: MCRCWest@Maricopagop.org

Request for Precinct Committeeman Appointment

Congressional District _____ Supervisor District _____ Legislative District _____ Precinct _____

Request is hereby made of the Maricopa County Board of Supervisors that the following named Person be appointed to the office of : **PRECINCT COMMITTEEMAN** in the above named precinct.

FULL AND COMPLETE NAME AS REGISTERED TO VOTE. PLEASE PRINT OR TYPE

Street/City/Zip Code

Mailing Address, if Different

Home Phone

Cell Phone

Email address

Voter ID#

DATE OF BIRTH

Number of PC's authorized for Precinct _____

Number of Vacancies _____

VERIFY THAT THE INDIVIDUAL IS REGISTERED TO VOTE AT THE ABOVE ADDRESS

Applicant's Signature

Date

Precinct Captain's signature, if applicable

Date

District Chairman's signature

Date

Maricopa County Republican Committee Chairman signature

Date