

Josephine County Republican Central Committee

www: jocogop.org

Holli Morton, Chairperson

Application for Appointment as a Precinct Committee Person

Applicant: Print Name: _____

Date: _____

Street Address: _____

P.O. Box _____ City: _____ ZIP _____

Telephone: _____ Cell _____

Email Address: _____

Precinct Name: _____ Precinct NO: _____

(Leave blank if you do not know your precinct and we will assign based on your address)

_____ Resident Precinct _____ Adjacent Precinct

(Leave blank if you are willing to serve in either resident or adjacent and we will make an assignment)

I agree to perform the duties of a PCP to the best of my abilities. (See www.jocogop.org for the top ten duties of a PCP, how to get involved and learn about current events).

Applicant Signature _____ Date _____

Approved by Holli Morton, Chair, Josephine County Republican Central Committee

Signature: _____ Date _____

Holli Morton, Chair

Date sent to county clerk for notification: _____