

Committee For and Against appointment form

Name of Jurisdiction / Proposition No.: _____

Jurisdiction Contact Name: _____

Email: _____ Phone: _____

Jurisdiction's responsibility:

- Email completed form to elections@clark.wa.gov on or before the resolution submission deadline (Submission deadlines are located on page 16)

Questions? Call 564-397-2345 or email elections@clark.wa.gov

****1st Committee Member (chair) must provide contact information for print in the local voters' pamphlet. No other contact information provided will be printed in the local voters' pamphlet.***

For committee (1-3 members)	Against committee (1-3 members)
Name	Name
*Email <i>(published in pamphlet)</i>	*Email <i>(published in pamphlet)</i>
*Phone <i>(published in pamphlet)</i>	*Phone <i>(published in pamphlet)</i>
*Website <i>(published in pamphlet)</i>	*Website <i>(published in pamphlet)</i>
2 nd Committee Member	2 nd Committee Member
Name	Name
Email	Email
3 rd Committee Member	3 rd Committee Member
Name	Name
Email	Email