



CULPEPER COUNTY DEMOCRATIC COMMITTEE
**DECLARATION OF CANDIDACY FORM FOR MEMBERSHIP
 ON THE CULPEPER COUNTY DEMOCRATIC COMMITTEE**
Term runs from January 1, 2018 until December 31, 2019

(Please **Print** the following information)

I, _____ of _____ Magisterial District,
 _____ Precinct of Culpeper County do declare my candidacy to become a
 member of the Culpeper County Democratic Committee.

(Every person who wishes to participate as a member of the Committee must be a qualified voter of the county and eligible to vote in the next ensuing election. No person shall become a member of the committee who intends to support any candidate who is opposed to a Democratic Nominee for the duration of his or her term on the Committee.)

I, the undersigned, have read the above statement; and hereby state that I am fully qualified to become a member of the Culpeper County Democratic Committee.

Signature: _____ Date: ____ / ____ / ____

(Please **Print** the following information)

Address: _____ Telephone: _____ (H)
 City: _____ State: _____ Zip: _____ (C)
 _____ (W)
 _____ (FAX)

Email: _____ Associate Member ___ Non-county resident

Voluntary Administrative Fee of \$30.00 Paid ___ Waived ___

Please make checks payable to and return this form to:

**Culpeper County Democratic Committee
 P. O. Box 131
 Culpeper, VA. 22701**

Authorized and Paid for by the Culpeper County Democratic Committee