



ALTERNATE APPOINTMENT FORM

Date: _____

I hereby nominate:

Name of Alternate: _____

Home Address: _____

City & Zip: _____

Supervisorial District or Ex-Officio Office: _____

Work Phone: _____ Home Phone: _____

Cell Phone: _____ Email: _____

as my alternate on the Sacramento County Republican Central Committee to vote on my behalf in my absence at any regular and special meeting of the Committee. This appointment shall remain in effect until revoked in writing by me.

I certify that this alternate is legally registered to vote as a Republican in Sacramento County and he or she has agreed to abide by the Sacramento County Republican Party Bylaws, the oath of office, and the laws of the State of California, including the California Elections Code.

Signature of appointing member _____

Printed name of appointing member _____
(please print)

Supervisorial or Ex-Officio District _____

Date Sworn In _____