PRECINCT CHAIR APPLICATION

For Mid-Term Vacancies ONLY

1414 N. Washington Ave. Dallas, TX 75204 | Phone: 214-821-8331 | Fax: 214-821-0995

Precinct Number	VUID #:
Full Name	
Registered Address	
City, State, ZIP	
Mailing Address	
(if different than above)	
Date of Birth	
Phone Number*	
Secondary Phone Number	
E-mail Address**	
Occupation	
1	Address None ty Office at any level (including precinct chair, convention delegate, and alternate f the Democratic Party nominees or shall be removed
Applicant's signature	Date:
If you did not vote in the mos	t recent Democratic Party Primary Election you must sign the following:
	Oath of Affiliation:
I swear that I have not voted in a primary election or participated in a convention of another party during this voting year. I hereby affiliate myself with the Democratic Party. (Texas Democratic Party Rules, Article III, Section E, 3(a)).	
X	Date:
Applicant Signature of Oath	