

## *Ex Officio*'s Alternate Appointment Form (Please print)

| l,  |  | , an ex officio member of the SBCDCC from t  | he |
|---|--|--|----|
| District, appoint   |  | , as my (circle the appropriate designation) |    |
|   | (Alternate's name)                       |  |    |
| Permanent Alternate <b>OR</b> _1 <sup>st</sup> Alternate and I authorize him/her to vote in |  | lternate                                     |    |
| Signature:  |  | Date:  |    |
| Alternate's name:   |  |  |    |
| Assembly District #:  | Senate District#:                        | Congressional District #:                    |    |
| Address where alternate i   | •  |  |    |
| City:   |  | CA, zip:                                     |    |
| •   | <b>ss</b> (if different from registratio | n address):                                  |    |
| Alternate's contact inform  | nation:                                  |  |    |
| Work Phone: ( )   | Cell Phone:                              | ( )  |    |
| Home Phone: ( )   |  |  |    |
| Required for campaign fina  | nce reporting: Alternate's occ           | supation:                                    |    |
| Alternate's Employer:   |  |  |    |
| Address:  |  |  |    |
| June 23, 2016   |  |  |    |