

PROXY CHECKLIST

ELIGIBILITY

1. Proxy must be a registered California Democrat and cannot already be a member of the State Central Committee.
2. If you were elected by an Assembly District Election Meeting, proxy must be registered in the same Assembly District.
3. If you were elected by a County Central Committee, proxy must be a member of the same County Central Committee.
4. When possible proxy should be of the same gender.

SUBMISSION

5. This Proxy form must be submitted to **emma@cadem.org** in advance by November 1st or hand carried onsite to the Proxy/Credential table.
6. Penalty of perjury statement **MUST** be signed by the delegate to be valid.
7. Proxy forms may be **filed in advance by 5PM on Friday, November 1, 2019** to the State Party Office in Sacramento, CA, or on site at the Long Beach Convention Center.
8. It is recommended the proxy brings a copy of the completed form onsite even if submit a copy in advance.

APPROVAL AND REGISTRATION

9. Proxies must complete registration process prior to representing you.
10. Proxies shall report to the Proxy Table prior to receiving their credential.
11. Dues and convention fees must be paid. Only members can request a waiver of dues.
12. Credentialing ends at 10:00AM on Sunday, November 17, 2019.

MEMBER / PROXY GIVER

I hereby designate the following as my proxy with full power to act for me at the meeting of the Democratic State Central Committee at the Long Beach Convention Center on November 15-17, 2019, and declare under penalty of perjury I am a duly qualified member of this Committee, that my proxy holder is eligible to represent me, and that the information on this form is true and correct to the best of my knowledge and belief.

Member Signature **Date**

 Member Name (Print) Member occupation Member employer

 Registration Address

 City Zip

 Phone #

 County Assembly District

PROXY HOLDER

 Proxy Holder Name (Print) Proxy occupation Proxy employer

 Registration Address

 City Zip

 Phone #

 County Assembly District

OFFICIAL USE ONLY

1. Is proxy already in pre-approved binder?
2. Has proxy giver signed penalty of perjury statement?
Signed: Yes No

3. Is proxy holder is a registered California Democrat?
Registered CA Democrat: Yes No

4. Check membership list. Is proxy holder NOT already a member of the DSCC?
Holder Not on DSCC: Yes No

5. Check membership list. Is proxy giver a member of the DSCC? Write down their DSCC number (7 digit number starting "D" or "F").

DSCC #: _____

6. If first number of DSCC # is 7, is the proxy holder registered in the same Assembly District?
Same AD: N/A Yes No

7. If first number of DSCC # is 4, is proxy holder member of the same county committee?
Same County Committee: N/A Yes No

DO NOT APPROVE IF PROXY GIVER DOES NOT HAVE A DSCC # OR IF YOU ANSWERED NO TO ANY STEP.

- If approved:
- Copy proxy giver's name & DSCC # and proxy receiver's name on Approved Proxy Form.
 - Stamp and initial both forms.
 - Keep this form and give Approved Proxy Form to proxy holder.

STAMP HERE IF APPROVED

INITIAL: _____