

_____ County, GA

I am a resident and registered voter in _____ County, GA. I hereby make application to be an elected member of the Democratic Party of Georgia State Committee. I believe in the goals of the Democratic Party of Georgia, am not a member of any other political party or body (as defined in the Georgia Election Code), and am not affiliated with any political group whose ideal, goals, and methods are incompatible with that of the Democratic Party of Georgia (as identified by the Executive Committee of the Democratic Party of Georgia).

_____ Applicant

_____ Address

_____ Telephone

_____ Email