

For / Against Committee Appointment Form

This form is to be completed by the jurisdiction submitting the ballot measure.

The deadline for submitting this form is the same as the deadline for submitting a resolution and ballot title.

district information	_____		
	name of district and name of ballot measure		
	_____	_____	_____
	name of person completing this form	title	phone

<input type="checkbox"/> If the district is not appointing a “for” committee, check to confirm	<input type="checkbox"/> If the district is not appointing an “against” committee, check to confirm
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committee member information each individual listed has consented to serve on the respective committee as indicated	Committee “for” ballot measure	Committee “against” ballot measure
	①	①
	_____	_____
	name – this person will be the Chair of the committee	name – this person will be the Chair of the committee
	_____	_____
	email – <i>required</i>	email – <i>required</i>
	_____	_____
	phone	phone
	②	②
	_____	_____
name	name	
_____	_____	
email	email	
_____	_____	
phone	phone	
③	③	
_____	_____	
name	name	
_____	_____	
email	email	
_____	_____	
phone	phone	
Each committee may include one of the following methods of contact information to publish in the Voters’ Guide: <ul style="list-style-type: none"> • a phone number or • an email address or _____ .gov addresses are <i>not</i> allowed for email or web • a website 		
_____	_____	
“for” committee contact information	“against” committee contact information	