



2017 Nomination Form for the NSDP Officer Elections

This form will be reproduced and distributed to all State Central Committee members.

Name: _____

Address: _____

County: _____

**Congressional
District:** _____

**E-mail
address:** _____

Phone: _____

Gender (circle one): M F

Employer: _____

Occupation: _____

Position sought:

Chair: _____

First Vice-Chair: _____

Second Vice-Chair: _____

Secretary: _____

Treasurer: _____

Please state why you are seeking to run for this office:

Please state any experience that you would like to share that prepares you for this position (please feel free to attach a bio):

I affirm that as of this date that I submit this form, that I am a registered democrat in the State of Nevada having voted in the previous General Election.

X _____
Signature

Date

***E-mail this form to nominations@nvdems.com or fax to 702.735.2700
or mail it to our office at 6233 S. Dean Martin Dr. | Las Vegas, NV 89118***

Deadline: Friday, February 10, 2017 at 5:00 PM