

March 1, 2017

Snohomish County Democrats

2017 Candidate Endorsement Questionnaire

Today's Date: _____

Candidates Name: _____

Position Sought: _____

Campaign E-mail Address: _____

Campaign Mailing Address: _____

Campaign Phone Number: _____

Campaign Manager: _____ Phone: _____

Please return your questionnaire as soon as possible to the Endorsement Committee Co-Chairs to be considered for endorsement. Your request for endorsement will not be considered by the Endorsement Committee without a timely reply. This is a public document it will be viewed by everyone. Please upload your photo with your questionnaire.

1. Do you identify yourself as a Democrat? _____

2. Do you support the Snohomish County Democratic Party 2016 Platform, especially on Civil and Human Rights, Economic Justice, the Environment, Human Services, Diversity and Immigration? _____

3. Do you support the rights of all workers, including public employees, to organize and bargain with their employers? _____

4. Do you support the rights of all adults to make their own health decisions? _____

5. What are the top three (3) items you expect to accomplish by the completion of your first term in office if elected? _____

6. How will you engage and represent young voters? If endorsed, will you use the endorsement in advertisements? How will you use it? _____

7. Do you support raising the minimum wage? _____

8. Why are you running for office? _____

9. What background, education, experience do you bring to the office you seek? _____

10. What are the major issues your campaign will focus on? _____

11. What will your campaign include, e.g. doorbelling, mailing, signs, telephoning? _____

12. What community endorsements and support have you received or do you expect? _____

In seeking endorsement, I submit this information as my position as a candidate.

(Signature)

(Date)

Return your Questionnaire to:

endorsements@snocodems.org

SCDCC Endorsement Committee