

FAIRFAX CITY DEMOCRATS

DECLARATION OF CANDIDACY FOR MEMBERSHIP ON THE CITY OF FAIRFAX DEMOCRATIC COMMITTEE (CFDC Membership Filing Form)

I, _____, declare myself to be a candidate for membership on the City of Fairfax Democratic Committee (CFDC). I also declare that I believe in the principles of the Democratic Party and I will not support any candidate opposed to any Democratic nominee or any candidate endorsed by a Democratic committee for as long as I am a member of this Committee.

Residential Address: Mailing Address (if different)

Street: _____

Unit#: _____

City/State/Zip: _____

Phone: Cell: _____ Home: _____

Email: _____

____ I hereby certify that I am registered to vote in the City of Fairfax, Virginia.

Date: _____

Signature: _____

Completed CFDC Membership Filing forms may be returned via one of several methods:

- Returned by US Mail to CFDC, PO Box 3167, Fairfax, VA 22038
- Online at www.FairfaxCityVotes.com/Membership