



DISTRICT OF COLUMBIA BOARD OF ELECTIONS

APPLICATION FOR APPROVAL OF THE NAME OF A POLITICAL PARTY IN THE DISTRICT OF COLUMBIA

Proposed Party Name:	
	(Please print when completing table below)

Names of <u>All</u> Officers & Authorized Local Party Committee Members	Title of Position in Party	Address	Phone Number	Voter Registration Number

I am requesting approval of the name of the above political p of additional members are attached, if not provided in the atta	party pursuant to Title 3 D.C.M.R. §§ 1501 and/or 1601. The names ached table.					
I certify that the above information (and any attached information) is true to the best of my knowledge.						
Signature of Applicant:	Printed Name:					
Date: Telephone Number:	Email:					
Subscribed and sworn, or affirmed, to before me this	day of					
Notary Public or Board of Elections Official:						

^{**}Under D.C. law, each political committee organized to promote a political party must file a Statement of Organization with the Director of Campaign Finance at 1015 Half Street SE, Suite 775, Washington, DC 20003 (202-671-0550) within 10 days after organization.