



Snohomish County Republican Party Candidate Endorsement

Biographical:

Candidate Name: _____

Office Seeking: _____

Campaign Contact Information:

Website: _____ Email: _____

Twitter: _____ Facebook: _____

Mailing Address: _____

Phone Number: _____

Background:

How long have you lived in Snohomish County? _____

	Yes	No
Does your spouse support your campaign effort?	()	()

Have you ever:

Been divorced () ()

Been convicted of a felony () ()

Been convicted of DUI () ()

Been convicted of domestic violence () ()

Failed or refused to pay your taxes () ()

Have you ever been the defendant in a lawsuit? () ()

Would you be willing to submit to a background check? () ()

Are there any background issues that could surface which may cause a negative focus during a campaign or appointment process?

If so, please detail: _____

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Looking forward to preparing your campaign for 2017, do you have a:	Yes	No
Finance Committee?	()	()
Campaign Manager?	()	()
If yes: Name _____		
Steering Committee?	()	()

Endorsements:

What endorsements or key supporters have you received to date: _____

Who would be your 10 contributors? _____

Position Involvement:

Why are you running? _____

Describe what you know about Snohomish County or your District: _____

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What are the top three issues for your race? _____

In what way would/does this position interact with the state and federal government? _____

Describe the priorities facing Snohomish County or your District? (Economic, transportation, affordable housing, etc.) _____

What specific improvement suggestions regarding this position would you like to bring forward?

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Other Experience:

Have you served on any County Boards/Commissions? If so, detail which ones and did you have a leadership role? _____

Describe your community involvement (Chamber of Commerce; Rotary; Boys and Girls Clubs; YMCA, etc.) – Include leadership activities: _____

Attach resume and/or CV

I hereby affirm/attest that all the information contained in this questionnaire is true and accurate, to the best of my knowledge.

X _____

Printed Full Name

Name as Candidate

Mail to: SCRP, 514 State Ave, #109, Marysville, WA 98270

Email to: chair@snocogop.org