Los Angeles, CA May 25 – 28, 2023

# PROXY CHECKLIST

### **ELIGIBILITY**

- 1. Proxy must be a registered California Democrat and <u>can't</u> already be a Democratic State Central Committee Delegate.
- If you were elected by an Assembly District Election Meeting, proxy must be registered CA DEM in the same Assembly District.
- If you are an elected Delegate by a County Central Committee, proxy must also be a member of the same County Central Committee.
- 4. When possible, proxy should be the same gender as the delegate

#### **SUBMISSION**

- 5. This proxy form must be submitted in advance for pre-approval, no later than Friday, May 5, 2023, at 5pm, and MUST be \*scanned and submitted using the online submission form at CDPconvention.org, under the Registration page or mailed to 1830 9<sup>th</sup> St. Sacramento, CA 95811 or hand carried onsite to the Proxy/Credential Table.
- Penalty of perjury statement MUST be signed by the delegate to be valid.
- It is recommended the proxy brings a copy of the completed form onsite even if submit a copy in advance.

### **APPROVAL AND REGISTRATION**

- Delegates sending proxies must complete the registration process prior to approval of the representing you.
- Proxies shall report to the Proxy Table onsite in HALL A/B prior to receiving their credential.
- Dues and convention fees must be paid. Only Delegate members can request a waiver of dues.
- Credentialing ends at 10:00AM on Sunday. No more proxies will be accepted after the closing of credentials/registration.

## **MEMBER / PROXY GIVER**

I hereby designate the following as my proxy with full power to act for me at the meeting of the Democratic State Central Committee at the Los Angeles Convention Center on May 25-28, 2023, and declare under penalty of perjury I am a duly qualified member of this Committee, that my proxy holder is eligible to represent me, and that the information on this form is true and correct to the best of my knowledge and belief.

Member Signature		Date
Member Name (Print)	Member occupation	Member employe
Registration Address		
City		Zip
Phone #	Email of Delegate	
County PROXY HOLDER		Assembly District
Proxy Holder Name (Print)	Proxy occupation	Proxy employer
Registration Address		
City		Zip
Phone #	Email proxy would like electronic ballot sent to onsite	
County		Assembly District

OFFICIAL USE ONLY 1. Is proxy already in pre-approved binder?			
2. Has <u>proxy giver</u> has signed penalty of perjury statement?			
Signed: ☐ Yes ☐ No			
3. Is <u>proxy holder</u> is a registered California Democrat?			
Registered CA Democrat: $\Box$ Yes $\Box$ No			
Check membership list. Is <u>proxy holder</u> NOT already a member of the DSCC?			
Holder Not on DSCC: $\Box$ Yes $\Box$ No			
5. Check membership list. Is <u>proxy giver</u> a member of the DSCC? Write down their DSCC number (7 digit number starting "D" or "F").			
DSCC #:			
6. If first number of DSCC # is 7, is the proxy holder registered in the same Assembly District?			
Same AD: ☐ N/A ☐ Yes ☐ No			
7. If first number of DSCC # is 4, is proxy holder member of the same county committee?			
Same County Committee: $\square$ N/A $\square$ Yes $\square$ No			
DO NOT APPROVE IF PROXY GIVER DOES NOT			

If approved:

 Copy proxy giver's name & DSCC # and proxy receiver's name on Approved Proxy Form.

NO TO ANY STEP.

- Stamp and initial both forms.
- Keep this form and give Approved Proxy Form to proxy holder.

STAMP HERE IF	APPROVED
INITIAL:	