

# Montgomery County Democratic Committee

## Committeeperson Resignation Form

Date: \_\_\_\_\_, 20

### Applicant:

First Name	M.I.	Last Name

### Voting Precinct:

Municipality	Ward	Precinct

### Address:


SIGNATURE: \_\_\_\_\_

Please sign and print names. This resignation approved by:

Officers	Signature	Print Name
Municipal Chair		
Area Leader		
County Chair		Joseph S. Foster

PO Box 857 \* Norristown, PA 19404 \* Tel.610-272-2000 / Fax.610-272-2005

Paid for by the Montgomery County Democratic Committee