

Dear Candidate,

The Washington State Federation of Democratic Women's (WSFDW) thanks you for stepping forward for public service. Please complete the attached questionnaire, this information will only be used by WSFDW for endorsement consideration and education of our members and endorsed candidates.

Washington State Federation of Democratic Women (WSFDW) Questionnaire

|  |  |
| --- | --- |
| Candidate Name |  |
| Position sought |  |
| Jurisdiction/ District |  |
| WSFDW Local Chapter |  |
| **Campaign Information** | |
| Campaign Name |  |
| Web page |  |
| Campaign Email address |  |
| Campaign mailing address |  |
| Campaign phone number |  |
| Manager |  |
| Consultant(s) |  |

|  |
| --- |
| **Candidate Qualifications** |

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Please answer the following questions:** | | **Yes** | **No** | **Qualified** |
| 1 | Are you known as a Democrat? |  |  |  |

*\* If you chose “no” or “qualified” as your answer for a question, please explain below:*

* Why are you running for office (50 words or less)?
* Beside the Democratic Party, which Political Action Committees and organizations do you have support from, either in financial contributions or campaign help?
* What organizations do you belong to and to which do you feel most connected?
* In order of importance, list the five (5) most important issues you feel are confronting your jurisdiction.
* Please write about any two (2) of the above issues with an emphasis on women's concerns.

Thank you for taking the time for your response. We will contact you if any other information is needed regarding this endorsement.

Sincerely,

Your local Chapter Chair or PAC/Endorsement Chair