

**LOS ANGELES COUNTY DEMOCRATIC PARTY
ENDORSEMENT RECOMMENDATION/CANDIDATE INTERVIEW
MEETING LOCATION PLANNING FORM**

Please complete and return this form to the Los Angeles County Democratic Party by fax at (213) 382-1278 or by email at endorsements@lacdpc.org at least two (2) weeks prior to your scheduled Endorsement Recommendation Meeting. If you have any questions, please contact the LACDP Political Department at (213) 382-1211 or endorsements@lacdpc.org.

Assembly District(s): _____ Election Date (Month/Date/Year): _____

Delegation or Committee Co-Chair (or Lead Contact, if more than one AD): _____

Contact Cell Phone: _____ Contact Email: _____

Race(s) Considered: _____

Meeting Location Information

Date of Endorsement Recommendation Meeting (Month/Date/Year): _____

Meeting Time: _____:_____ AM / PM to _____:_____ AM / PM (Ending time approximate)

Meeting Location Name: _____

Meeting Location Street Address: _____

City: _____ State: _____ ZIP: _____

Parking Information/Other Notes: _____

Site Contact Person: _____ Site Phone: _____

- I have confirmed that the meeting location is ADA accessible.
- Candidate Waiting Area: Yes / No
- On-Site Parking Lot: Yes / No
- Restrooms (Wheelchair Accessible): Yes / No

Meeting Interview Schedule (Please use reverse or another sheet if necessary)

Race: _____ Interview Time: _____:_____ AM / PM

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