

Want to help Republicans get elected? Here's what you can do...

- ***Join the Seminole County Republican Executive Committee (SCREC)***
 - ◆ A grassroots organization downstream from the RPOF
 - ◆ Every county in Florida has a Republican Executive Committee
 - ◆ Purpose: to *ELECT* Republicans
 - ◆ Official Link between the voters and the state & national GOP organizations

- ***What does it mean to become a member of the SCREC as a Precinct Committeeman/Committeewoman? You are...***
 - ✓ a primary party contact between the voters, candidates, and elected officials
 - ✓ an **elected official**, registered in Tallahassee
 - ✓ Responsible of approximately 1000 voters in your precinct

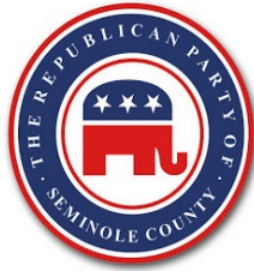
- ***Responsibilities of a being a Precinct Committeeman/Committeewoman...***
 - Get a voter list of your precinct.
 - Help get out the vote – walk your precinct, make phone calls
 - Enlist people to help
 - Attend monthly meetings
 - Submit an excuse when you can't attend the monthly meeting.

- ***Ready to help by becoming a SCREC member? The next step...***
 - Fill out an application
 - **Must be a registered Republican for at least 365 days**
 - Attend monthly SCREC meetings
 - Sign the Republican Party of Florida Loyalty Oath
 - Affirmation by SCREC membership by being present at a montly meeting when a quorum of voting members is present.

Fill out an application and get started today helping elect Republicans!

Additional Contact Information
Steve Collins, SCREC Secretary
precinct40@proton.me
407-353-8387





Welcome to the Republican Party Of Seminole County

Membership is important. **You must be a registered Republican for 365 days** before you can join the REC. Attached are three (3) forms that you will need to fill out completely:

- Seminole County Republican Executive Committee (SCREC) Application Form
- Republican Party of Florida (RPOF) Loyalty Oath Form (**must be signed in front of a witness**).
- Candidate Oath Form
 - When filling out this form, select either Committeeman or Committeewoman
 - If you are unsure of your precinct number or your voter ID number, both can be found on your voter registration card. You can also find your information at www.voteseminole.org/voters#findmyrecord
 - **This form must be notarized. Do not sign this form unless you are present in front of a notary.** There are notaries available at the membership meeting on the third Thursday of the month.

Once your application is complete, please email to Steve Collins, (precinct40@protonmail.me), SCREC Secretary & Membership Chair, who will process the application. Completed applications must be received at least 10 days prior to next scheduled General Membership Meeting in order to be eligible for approval at that meeting.

Applications for membership are received and approved by the Executive Board. Candidate must be present at a General Membership Meeting, when a quorum is present, for the candidate's name to be on the ballot. Candidates are approved by the general membership. Once approved, you will be a full voting member at the next general meeting.

THERE IS NO OTHER PROCESS TO FILL PCM/PCW VACANCIES!

Questions? Please feel free to contact us:

The Republican Party of Seminole County

Bruce Cherry, Chairman, bgcherryjr@yahoo.com

Kelly Shilson, Vice Chair, kellyshilson@gmail.com

Steve Collins, Secretary, precinct40@protonmail.me

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www.SeminoleGOP.org



Seminole County Republican Executive Committee

Application for the four year term that begins
December 2020 and ends November 2024

Please be sure that your name and address exactly match your Seminole County voter registration. If you have moved or changed your name, please let us know.

Precinct No.

Name		Spouse's Name	
Home Address		City	
		Zip Code	
Employer		Occupation	
Mobile Phone	May we text you? <input type="checkbox"/> Yes <input type="checkbox"/> No	Home or Work Phone	
Email Address	<input type="text"/>		
Date of Birth	Registered Republican since	Registered Voter in Seminole County since	

Have you previously been a member of SCREC? <input type="checkbox"/> Yes <input type="checkbox"/> No	List any elected or appointed position in city, county, state, or federal service:
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SCREC is a volunteer organization. How many hours per week will you dedicate toward helping Republicans win in the General Elections?

The following is a list of committees in SCREC. Please check boxes where you have talent, experience or interest in helping.

Are you interested in a leadership position? Yes
 No

- | | | |
|---|--|---|
| <input type="checkbox"/> Voter Registration | <input type="checkbox"/> Fundraising Events | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Voter Outreach | <input type="checkbox"/> Fundraising Small Donations | <input type="checkbox"/> Communications |
| <input type="checkbox"/> Outreach area: _____ | <input type="checkbox"/> Merchandise | <input type="checkbox"/> Artwork |
| <input type="checkbox"/> WebElect | <input type="checkbox"/> Phone Banking | <input type="checkbox"/> Office Work |

Please list the names of registered Republicans who can recommend you:

1.	2.
3.	4.

Applicant Signature	Date Signed
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PARTY LOYALTY OATH

I, _____, swear or affirm that during my term of party office
Print Full Name Clearly

I will not actively, publicly, or financially support the election of any candidate:

(1) Seeking election against the Republican Party’s nominee in a partisan unitary, general, or special election that includes a Republican nominee; or

(2) Who is not a registered Republican and is seeking election against a registered Republican in a non-partisan election, except that this provision does not apply to judicial races under Chapter 105, Florida Statutes.

I further swear or affirm that, in my capacity as a Republican Executive Committee member I will not support, in a contested Republican primary election, the nomination of one Republican candidate over another, or in a nonpartisan election, the election of one registered Republican over another, unless the Executive Committee has voted to endorse that candidate in accordance with RPOF Rule 8. This provision does not preclude me from supporting in any manner my personal Republican candidate of choice in a contested Republican primary election or my personal registered Republican candidate of choice in a nonpartisan election, provided I do not express such support with public reference to my title or office within the Republican Party of Florida.

Signature of Member

Date: _____

County/Precinct #: _____

Party Office: _____

(State Committeeman/Committeewoman; Precinct Committeeman/Committeewoman; or Alternate Precinct Committeeman/Committeewoman)

Street Address *(as appears on voter registration)*

City/Zip

Email

(Loyalty Oath Must Be Witnessed, Verified, or Notarized)

Signature of Witness

Printed Name of Witness

CANDIDATE OATH –

Committeemen and Committeewomen

Check applicable one:

- Precinct Committeeman or Committeewoman
- District Committeeman or Committeewoman
- State Committeeman or Committeewoman

OFFICE USE ONLY

Candidate Oath

(Sections 99.021(1)(a) and (2), Florida Statutes)

I, _____,

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box (see page 2 - Compound Last Names). No change can be made after the end of qualifying.)

am a candidate for the office of **Committeeman** **Committeewoman**

Precinct/District Number _____ (Not applicable to State Committeemen and State Committeewomen);

I am a qualified elector of _____ County, Florida; I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Statement of Party

(Section 99.021(1)(b), Florida Statutes)

I am a member of the _____ Party; I have been a registered member of this political party, for which I am seeking nomination as a candidate, for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, by the executive committee of the above-stated political party.

Candidate's Florida Voter Registration Number (located on your voter information card): _____

Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): *[Not applicable to write-in candidates.]*

X _____ () _____
Signature of Candidate Telephone Number Email Address

Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF _____

Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of
online notarization OR physical presence
this _____ day of _____, 20____.

Personally Known OR Produced Identification

Type of Identification Produced: _____