

STATEMENT OF ACCEPTANCE OF POSITION OF CHAIRPERSON

I, _____ residing at
NAME

ADDRESS

solemnly swear or affirm that effective _____, I hereby agree to serve as the

DATE

Chairperson for the _____ .
NAME OF COMMITTEE

I accept this position with the full knowledge of the duties and responsibilities thereof. I agree to serve in this capacity until a statement of my withdrawal is received by the Office of Campaign Finance, and a copy of my withdrawal sent to the address of record of treasurer, and candidate, if an authorized committee, within forty-eight (48) hours of vacating the office, in accordance with **3 DCMR § 3000.16 (b)**.

HOME PHONE

E-MAIL ADDRESS

SIGNATURE OF CHAIRPERSON

Subscribed and sworn or affirmed to by me this _____ day of _____
MONTH/YEAR

My Commission Expires: _____
DATE

NOTARY PUBLIC

This Statement of Acceptance of Position of Chairperson must be filed with the Director, Office of Campaign Finance, Frank D. Reeves Municipal Building, 2000 14th St., N.W., Suite 433, Washington, D.C. 20009, within five (5) days of assuming the Office pursuant **3 DCMR § 3000.16 (a)**.

