

Pinal County Republican Committee

Precinct Committeeman Application Form



Term of Office: 2026-2028

(October 1, 2026 – September 30, 2028)

I confirm that I am a registered Republican: _____ ☐ Republican

Voter ID# (From Voter ID Card) _____

Precinct #: _____ Board of Supervisor District #: _____ LD: _____ CD: _____

(all information can be found on your Voter ID Card)

Please accept the Appointment Resignation (circle one)
of the following individual as a Precinct Committeeman:

Last Name	First Name	Middle Initial
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Resident Address ☐

Mailing Address (if different than above) ☐

City/Town	Zip Code	Telephone #	Email Address
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Signature of Appointee or Resignee	Date
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Signature of District Chair	Date
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Authorized Signature of Party Chair	Date
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All Precinct Committeeman appointments are submitted by the County Chair pursuant to A.R.S. 16-821(B).

County Party Chair's signature is required above.