

Democratic Party of Hawai'i
State Convention Platform, Rule Amendment, Resolution and Affirmative Action
Submittal Form

PRINT ONLY

Type of Document Check One: _____ PLATFORM _____ RULE
_____ RESOLUTION _____ AFFIRMATIVE ACTION

Title of Submission: _____

This submission requires _____ does not require _____ a bill in the State Legislature.

This submission requires _____ does not require _____ a resolution in the State
Legislature.

This submission requires _____ does not require _____ a bill in Congress.

This submission requires _____ does not require _____ a resolution in Congress.

This is submitted by: _____ Two Members _____ O'ahu County _____ Maui County
 _____ Kaua'i County _____ Hawai'i County

Name (County Chairperson or First Maker) _____

Signature _____ Date _____

Address _____

City _____ Zip _____

Home Phone _____ Bus. Phone _____

Cell phone _____ Facsimile _____

E-mail _____

District/Precinct (individual only) _____

Name (Second Maker) _____

Signature _____ Date _____

Address _____

City _____ Zip _____

Home Phone _____ Bus. Phone _____

Cell phone _____ Facsimile _____

E-mail _____

District/Precinct (individual only) _____

Attached are our proposal and a CD-ROM (if not e-mailed) with only this resolution or proposal on it. **Floppy disks will not be accepted.**
This submittal complies with the instruction sheet.

If this is submitted by two voting members of the State Convention, 10 supporter signatures must be recorded below.

We, the undersigned, support this submittal to the State Convention:

Name (PRINT)	Signature	Dist/Pct	Phone #
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____