



**Snohomish County Democrats and
Affiliated Legislative Districts
Judicial Positions Questionnaire – Previously Endorsed Candidates Only**

Dear Candidate,

Thank you for seeking an endorsement from the Snohomish County Democrats and other affiliated legislative districts. We appreciate your interest and your participation. When a candidate asks for our endorsement, we ask the candidate to complete this questionnaire. The Endorsement Committee's goal is to collect information important to our constituents in Snohomish County and to gain an understanding of your Democratic values and evaluate how you may serve in the elected position you are seeking.

This questionnaire helps us evaluate candidates seeking our endorsement. We will evaluate candidates based on information from multiple sources beyond this questionnaire. At the discretion of the Chair of the Endorsement Committee, you may be invited to an interview with the members of the Committee.

The Endorsement Committee will evaluate your endorsement request and make a recommendation to our Membership. You may be invited to the Membership Meeting to make a brief statement and possibly answer a few questions. Please consider time constraints when planning to return your questionnaire. We highly encourage you to submit your endorsement request as early as possible. NOTE: your questionnaire will not be considered unless you have filed with the PDC.

Our affiliated legislative districts may, at their discretion, use this form for their endorsement request. Please contact the legislative districts you intend to seek endorsements from and see if this questionnaire will be used or if there is another form you should submit.

Please return the completed questionnaire to: endorsements@snocodems.org and your LD endorsements contact.

Campaign Information

Candidate Name:

Candidate for what office:

Have you filed with the PDC?

Party affiliation:

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Campaign Committee Name:

Campaign Address:

Campaign Phone:

Campaign Email:

Campaign Website:

Campaign Manager name:

Email:

Phone number:

Campaign Treasurer name:

Email:

Phone number:

Campaign Consultant name:

Email:

Phone number:

Candidate Background

1. List the jurisdictions in which you are currently admitted to practice law and the dates of admission:
2. List your active bar association membership(s):
3. Please list all professional societies and political organizations of which you are currently a member, or have previously been a member:
4. Please list the individual and organizational endorsements you have obtained in support of your election to this position:
5. Have you ever been disciplined or cited for a breach of ethics or unprofessional conduct by, or are you now the subject of a complaint to, any court, administrative agency, bar association, disciplinary committee, or other professional group? If so, please give the details.
6. In the last 36 months, have you been included in any bar poll or judicial evaluations by the state and/or local bar associations or other legal or political organizations? If so, please attach a copy of those results.

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7. Have you submitted the Washington State Governor’s Office Uniform Judicial Evaluation Questionnaire? If so, please attach a copy.

Campaign Priorities

1. Please explain your reasons for seeking re-election to this position and describe the type of judge you strive to be within the court system and in service to the community.
2. Please describe your recent community and civic involvement and accomplishments.
3. Please describe two court cases you have presided over that demonstrate your commitment to upholding human rights and advancing equity for marginalized communities.
4. In situations where neither party, in your judgment, addresses the issue most critical to the case’s resolution, how do you view your role as a judge?

Applicant Disclosures

1. Have you ever failed to pay any taxes or court-ordered judgments? (If your answer is “Yes” please explain.)
2. Have you ever been found in violation of the Public Disclosure Commission or the Federal Election Commission? (If your answer is “Yes” please explain.)
3. Within the past 10 years, have you been convicted of, or pled guilty or no contest to, any felony or misdemeanor (other than minor traffic violations), or do you have any such charges currently pending? (If yes, list offense(s), date(s), and briefly explain.)

Do not include arrests that did not lead to conviction, juvenile matters, or records that are sealed, expunged, or otherwise protected under Washington law. A conviction does not automatically

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disqualify you. We will consider the nature of the offense, the time elapsed, and its relation to the elected position in a manner consistent with Washington law.

4. Are you currently subject to any court order, civil judgment, or professional/licensing or regulatory restriction that would prevent you from performing the essential duties of this elected position? (If yes, briefly describe the restriction, issuing authority, and dates.)

Do not provide information about medical conditions, disabilities, workers' compensation history, or other legally protected information. Such information will not be considered in endorsing decisions.

Applicant Acknowledgment and Certification

1. I certify that all statements and information provided by me in this endorsement process, including application and interview, are true, correct, and complete to the best of my knowledge and belief.
2. I understand and agree that any omission, misrepresentation, or false statement, whether intentional or unintentional, may be communicated to the SCDCC Membership and may impact any endorsement decision.
3. I authorize the SCDCC and its representatives to verify, to the extent permitted by law, any information I have provided in connection with my endorsement request.
4. I acknowledge that if the Endorsement Committee is unable to verify material information I have provided, or if information comes to light at any time that, in the reasonable judgment of the Endorsement Committee, would have led it to make a different recommendation to the Membership, endorsement by SCDCC may be rescinded effective immediately; and that in the case of rescission, I have the right to appeal this action in accordance with the Bylaws and Standing Rules.

Applicant Signature: _____ Date: _____

Printed Name: _____