**PLEASE RETURN THIS FORM TO: Sarah Frederick at sarah@frederickdisability.com**Applications must be typed. The Women’s TAP Fund supports qualified women running for state and local office in Western New York. These women must be pro-choice, pro-child care legislation and pro-ERA in order to qualify for our support. Please see our mission statement and deadline dates as they vary at [www.tapfund.com](http://www.tapfund.com).

Candidate Endorsement Questionnaire.

Candidate Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exact Name of Campaign Committee\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campaign Manager and Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campaign Treasurer and Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campaign Address and Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address and Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have a personal Email that is different please list\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Sought\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Party\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Election\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

General Election\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the Women’s TAP Fund endorses your candidacy, you agree to include the TAP endorsement in all of your campaign materials including print and other media. My signature below serves as a release permitting use of my name in any TAP Fund material.

Candidate’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The Women's TAP Fund was created to support women candidates for Western New York local and statewide (non-federal) offices. Candidates may be affiliated with any political party except Right-to-Life and must support equal rights for women and a woman’s right to make her own reproductive decisions, as well as support publicly** **and privately funded child care programs.**

**Candidates must answer YES to the following questions in order to be considered.**

ERA YES NO

1a. Are you in favor of a federal Equal

Rights Amendment to the U.S. Constitution

as follows: "Equality of rights under the

law shall not be denied or abridged by the

United States or any other state on account

of sex?"

1b. Do you support legislation to protect YES NO

equal rights for all individuals regardless

of gender, race, age, religion, ethnic

origin or sexual orientation?

REPRODUCTIVE RIGHTS YES NO

2A. Do you support the 1973 U.S. Supreme

Court decision in Roe v. Wade, which protects

a woman's fundamental right to choose an

abortion?

2b. Do you support governmental funding YES NO

of abortions for women who rely on programs,

such as federal and state Medicaid for

their health care?

2c. Do you oppose requirements that young YES NO

women must notify their parents or obtain

their consent prior to having an abortion?

2d. Do you support access to birth control YES NO

information for all women?

CHILD CARE

3. Do you support publicly and privately YES NO

funded childcare?

In answering the following questions about your campaign, please give as much information as is possible at this time or your plans for dealing with the subject. Please use additional pages, if needed. If you are involved in a primary, include information relevant to both the primary and general elections, e.g. opponents. Include news clips, videotapes, commercials, campaign literature or any other material you feel will be helpful.

1. Have you officially announced your candidacy or filed your treasurer's name with the appropriate state office?

2. Have you filed petitions? Why are you running? How and why will you win? Who are your key staff and volunteers?

3. What are yourmajorcampaign issues?

4. Describe your campaign-financing plan. Include budget, money raised to date, cash on hand, planned fundraising events, and if you plan to contribute your own funds.

5. Do you expect to receive your party's endorsement?

6. Are you seeking any other endorsement**s**?

7. Have you ever sought the Right To Life endorsement, or ever attempted an opportunity to Ballot [Write-in] for the Right To Life?

8. What groups have endorsed you this year or in the past?

9. Please list your active community memberships, indicating any that may have significant impact on this campaign e.g. promised volunteers, help with fundraising, and perspective on issues.

10. Who are your opponents? Primary? General? Is the incumbent running or supporting one of the candidates?

11. Describe the district - geography and demographics; You must provide the numbers of registered voters in your race; i.e. Total registered on the lines you’re endorsed or seeking endorsements: D, R, C, Ind, and WF. . Is your name a recognition factor in this race?

12. Is any polling data available? Please describe and give results.

13.List your important accomplishments in office if an elected or appointed official.

14. How do you intend to use the platform of your office to address women’s issues?

15. Please attach a resume and budget.

16. Please list any additional material that you have added to this questionnaire.