



DECLARATION OF CANDIDACY FORM 2020 Democratic National Convention Delegate

Tennessee Democratic Party, 319 Plus Park Blvd, Suite 202, Nashville, TN 37217
Phone 615-327-9779 Fax 615-891-7453

PAGE 1 of 2- BOTH PAGES ARE REQUIRED

This Declaration of Candidacy form must be submitted BY THE FOLLOWING DEADLINE:
March 27, 12:00pm Noon, Central time – for Pledged Party Leader/Elected Official Delegates and
At-Large Delegates

WAYS TO SUBMIT THIS FORM

<p style="text-align: center;">Online</p> <p>Fill out the electronic version of this form at TNDP.org/2020-dnc-delegate-selection-plan</p>	<p style="text-align: center;">By Fax</p> <p>Fax your completed Declaration of Candidacy form to: (615) 891-7453</p>
<p style="text-align: center;">By Mail</p> <p>Mail your completed Declaration of Candidacy form to: Tennessee Democratic Party 319 Plus Park Blvd, Ste 202 Nashville, TN 37217 MUST BE RECEIVED IN OFFICE BY DEADLINE</p>	<p style="text-align: center;">In Person</p> <p>Bring your completed Declaration of Candidacy form to our office during the following open operating hours (all Central time): Monday- Friday, 10am- 4pm Congressional District Due by: NOON, Thurs, Feb. 20 At-Large and PLEO Due by: NOON, Fri, Mar. 27</p>

REQUIREMENTS

Tennessee Democrats wishing to become 2020 DNC Convention Delegates must:

- Be registered to vote in Tennessee before February 3, 2020.*
- File this Declaration of Candidacy form with the TNDP Office by the indicated deadlines.
- Vote in the March 3, 2020 Democratic Presidential Preference Primary.*

DECLARATION OF RESIDENCY AND DEMOCRATIC PARTY SUPPORT

"I, _____, declare that I reside in _____
LEGIBLY Print Your Name Print County Name

County and I am a qualified and registered voter in that county. I further certify that I am a member of the Democratic Party and will support the nominee of the Democratic Party in the 2020 Presidential General Election. I understand that I must vote in the March 3, 2020 Democratic Presidential Preference Primary to be eligible to participate in this process. *

PLEDGE OF CANDIDATE SUPPORT

"I further declare that I am pledged to and a supporter of _____
LEGIBLY Print Presidential Candidate Name

If I am elected to be a delegate, I will attend the DNC convention in Milwaukee, WI, July 13-16 at my expense unless I shall be prevented by sickness or other occurrence over which I have no control, and will cast my vote for above stated candidate for nomination by the Democratic Party for President of the United States."

PAGE 2 of 2- BOTH PAGES ARE REQUIRED

*Those born between March 4, 2002 and November 3, 2002 (inclusive) will be 18 by the general election and are exempt from the registration and primary voting requirements for delegate selection participation.



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DECLARATION OF CANDIDACY

I request that my name be submitted as a candidate for delegate by the Tennessee Democratic Party so I may stand for nomination and election in the following category(ies) (check all that apply):

- ~~Congressional District Delegate (Due date for this category: Noon, Thursday, Feb 20.)~~
- Pledged Party Leader/Elected Official Delegate (Due date for this category: Noon, Friday, March 27.)
- At-Large Delegate (Due date for this category: Noon, Friday, March 27.)

PLEASE PRINT LEGIBLY

LAST NAME _____

FIRST NAME _____ MIDDLE INITIAL _____

ADDRESS _____

CITY _____ STATE TN ZIP _____

CONGRESSIONAL DISTRICT # _____ COUNTY _____

E-MAIL _____

MOBILE PHONE _____ HOME PHONE _____

GENDER by self-identification: Female _____ Male _____ Gender Non-Binary _____

DATE OF BIRTH: Month _____ Date _____ Year _____

Do you self-identify in any of the following ways? If so, please check any/ all that apply:

- African American
- Hispanic/Latinx
- Asian American/Pacific Islander
- Native American, Tribal Affiliation (required): _____
- Disability (including any person who might request disability accommodation or services)
- LGBTQ+
- Youth (under 36 at time of election)

I attest the above information is true and accurate. I understand that the above information may be shared as necessitated by the implementation of the TNDP Delegate Selection Plan.

SIGNATURE _____ DATE _____