



## **DECLARATION OF CANDIDACY FOR DISTRICT-LEVEL DELEGATE**

THE UNDERSIGNED, \_\_\_\_\_,  
of \_\_\_\_\_, New Hampshire, hereby declare my candidacy for Democratic Party  
District-Level Delegate for the \_\_\_\_\_ Congressional District.

I hereby pledge my support for \_\_\_\_\_, candidate for  
President of the United States (the "Candidate"), and hereby pledge to cast my vote in all  
conscience to reflect the sentiments of those who elect me if I am selected as a delegate.

I further certify that I am a registered and bona-fide Democrat, qualified to vote in the State of  
New Hampshire and the \_\_\_\_\_ Congressional District, or will be eligible to vote in the  
2020 General Election.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **CONTACT INFORMATION**

CLEARLY PRINT THE INFORMATION BELOW. INELIGIBLE SUBMISSIONS WILL NOT BE CONSIDERED.

Full Name: \_\_\_\_\_

Gender:                      Male                      Female                      Gender Non-Binary

Phone Number (home): \_\_\_\_\_

Phone Number (cell): \_\_\_\_\_

Email Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / Town: \_\_\_\_\_

ZIP: \_\_\_\_\_

THIS FORM MUST BE COMPLETED IN PERSON AT THE NHDP OFFICE or MAILED TO 105 N. STATE STREET,  
CONCORD, NH 03301 **BY 5PM ON JANUARY 10<sup>TH</sup>, 2020**. ELECTRONIC SUBMISSIONS WILL NOT BE  
CONSIDERED. IF MAILED, THIS FORM MUST BE RECEIVED BY 5PM ON JANUARY 10<sup>TH</sup>, 2020; FORMS  
POSTMARKED BY BUT ARRIVING AFTER 5PM ON JANUARY 10<sup>TH</sup>, 2020 WILL *NOT* BE CONSIDERED.

The New Hampshire Democratic Party is committed to having a diverse delegation for the 2020 Democratic National Convention. In order to assist us in meeting our affirmative action goals, please check below if you are a member of any of the following communities:

African American	<input type="checkbox"/>
Asian American / Pacific Islander	<input type="checkbox"/>
Latino / Hispanic	<input type="checkbox"/>
LGBTQ+	<input type="checkbox"/>
Native American	<input type="checkbox"/>
Person with Disabilities	<input type="checkbox"/>
Youth (36 and Under)	<input type="checkbox"/>

Please list any elected offices (state, county, or local) that you hold:

---

---

*\*\* Pursuant to Rule 13.D & Rule 13.F of the 2020 Delegate Selection Rules for the Democratic National Convention, presidential candidate(s), or their authorized representative(s), have the right of refusal for all district-level and alternate delegate candidates.*

**For a complete copy of the NHDP 2020 Delegate Selection Plan, please visit [www.nhdp.org/2020delegateselectionplan](http://www.nhdp.org/2020delegateselectionplan).**

**For any questions you have on this process, please email [dsp@nhdp.org](mailto:dsp@nhdp.org).**

### NHDP OFFICE USE ONLY

Date Received: \_\_\_\_\_

Time Received: \_\_\_\_\_

Staff Member Received By: \_\_\_\_\_

Method Received: \_\_\_\_\_

THIS FORM MUST BE COMPLETED IN PERSON AT THE NHDP OFFICE or MAILED TO 105 N. STATE STREET, CONCORD, NH 03301 **BY 5PM ON JANUARY 10<sup>TH</sup>, 2020**. ELECTRONIC SUBMISSIONS WILL NOT BE CONSIDERED. IF MAILED, THIS FORM MUST BE RECEIVED BY 5PM ON JANUARY 10<sup>TH</sup>, 2020; FORMS POSTMARKED BY BUT ARRIVING AFTER 5PM ON JANUARY 10<sup>TH</sup>, 2020 WILL NOT BE CONSIDERED.