

ALABAMA DEMOCRATIC PARTY
Statement of Candidacy and Pledge of Support for Candidates
for Delegate to the 2016 Democratic National Convention

County of Legal Residence (where registered to vote): _____

CONTACT INFORMATION- Please Print

NAME: (Print Clearly, as you wish it to appear on the ballot. NO TITLES.)

Mailing Address: _____

City/State/Zip _____

Residential Address (if different) _____

Telephone Numbers:

Work: () _____

Home: () _____

Cell: () _____

Fax: () _____

Email: _____

PLEGDED DELEGATE CLASSIFICATION AND PREFERENCE

I hereby notify the Chair of the Democratic Party of Alabama that I wish to be a Candidate for Delegate to the 2016 Democratic National Convention, and (Check one)

____ I pledge to support _____
 (Presidential Candidate)

____ I pledge to run Uncommitted.

Check one (check more, if not elected at the District Level, and you wish to run as a PLEO, or At-Large Delegate).

____ District-level Delegate in Congressional District Number _____

____ Party Leader and Elected Official (PLEO) Delegate
 (Please Specify) _____

____ At-Large Delegate

WORK INFORMATION

Employer: _____

Profession: _____

Contact Person at work, if not you: _____

PERSONAL INFORMATION

Preferred Title or Salutation: _____

Date of Birth (month/day/year) _____

Social Security #: _____
 (for security purposes only)

Diversity Information

(Please Circle ALL that Apply)

Male _____ Labor _____
 (Affiliation)

Female _____

African American _____ LGBT _____

Asian/Pacific Islander _____ Person with Disabilities _____

Caucasian _____ Senior Citizen (60 and over) _____

Hispanic _____ Veteran _____
 (Specify Branch of Service)

Native American _____ Youth (35 and under) _____
 (Tribal Affiliation and # required)

Other Ethnicity _____
 (Please Specify)

Political Information

(Current or Former)

Elected Official: _____
 (Please Specify)

Organization Official: _____
 (Please Specify) (Organization)

Party Position: _____
 (Please Specify)

Past Conventions Attended (Circle All that Apply)

2012 2008 2004 2000 1996 1992

Other _____
 (Specify Years)

Political Campaign Experience: _____

Signature of Delegate Candidate _____ **Date** _____

Sworn and subscribed before me on this the _____ day of _____, 20_____.

Notary Public's Signature _____

Date Commission Expires _____

Print Notary's Name _____

For Party Office Use Only:

Date Rec'd _____
 Amt. Pd. _____
 Receipt # _____
 Pmt. Type _____
 Computer _____