

Statement of Candidacy for Delegate to National Convention

This form must be accompanied by the pledge for support form from the Rhode Island Democratic State Committee and must be filed no later than 5:00 P.M. on June 3, 2020.

The undersigned hereby declares that he/she is eligible under the provisions of the Rhode Island General Laws to be a registered Democrat and makes the following declarations:

Name of Candidate As it appears on the voting list (PRINT OR TYPE)

Address	City/Town	State	Zip
Primary Phone Number	Email	Address	
Party Leader or Elected Official	Delegate to National Conventio	n	
Title/Office			

I hereby certify that I am not imprisoned upon conviction of a felony.

I hereby further certify that I have not been adjudicated to be non compos mentis, or unsound mind. I further certify that I have not been a member of any other political party other than the Democratic Party within 90 days of the filing of this document.

I state that if elected I will comply with all party rules relating to delegates to national conventions and conducting of national conventions.

Witnesses:

Signature of Candidate as it appears on voting list		Date
Signature	Date	Witness Address
Signature	Date	Witness Address



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Address	City/Town	State	Zip
Primary Phone Number	Ema	il Address	
At-Large Delegate to National Convention	I		

Title/Office

I hereby certify that I am not imprisoned upon conviction of a felony.

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Signature of Candidate as it appears on voting list		Date
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Address	City/Town	State	Zip
Primary Phone Number	Emai	l Address	
Alternate to National Convention			

Title/Office

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Signature	Date	Witness Address
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