

**Delegate or Alternate Filing Form
2017 6th Congressional District Convention**

I the undersigned, certify that I am a registered voter in the county or city listed below, subscribe to the principles of the Democratic Party, do not intend to support any candidate who is opposed to a Democratic Nominee in the next ensuing election, and will not participate in the nominating process of any other political party for the next ensuing election.

PLEASE PRINT:

NAME _____

ADDRESS _____

CITY _____ **ZIP** _____

PHONE(H) _____ **(W)** _____

EMAIL _____

CONGRESSIONAL DISTRICT _____

LOCALITY _____

PRECINCT/WARD _____

_____ **FILING FOR: DELEGATE** _____ **ALTERNATE** _____

FEES: DISTRICT \$10 + LOCAL \$0 = TOTAL \$10

District and local committees may request voluntary administrative fees for each delegate and alternate candidate to the District Convention. The total is not to exceed \$25.00. Local committees must submit the certified list of delegates and alternates to the 6th Congressional District Committee.

If elected a delegate or alternate to the 6th Congressional District Convention, I understand that, having expressed the above candidate preference, I will be bound to vote in that candidate's caucus on the first ballot at the District Convention.

Signature _____ Date _____