



2024 Democratic National Convention DISTRICT LEVEL DELEGATE FILING FORM

SUMMARY OF DELEGATE SELECTION PROCEDURES and FILING REQUIREMENTS for DISTRICT-LEVEL DELEGATES

A total of 146 District-Level Delegates have been allocated among Florida's Congressional Districts (CDs) and will be elected at Post-Primary Caucuses in each CD on April 20, 2024. Delegates will be allocated to presidential candidates to fairly reflect the expressed presidential preference of the primary voters within each respective CD. Any registered Democrat residing in the CD may vote at the respective Post-Primary Caucus.

This form may be completed online at www.floridadems.org and emailed to partyaffairs@floridadems.org. We recommend all forms be emailed to partyaffairs@floridadems.org.

All persons interested in running for delegate or alternate are encouraged to review the Florida Delegate Selection Plan for the 2024 Democratic National Convention. For more information about the delegate selection process, visit the state party's website at www.floridadems.org or email partyaffairs@floridadems.org.

District-Level Delegate candidates must fully complete this statement of candidacy, pledge of support and loyalty oath form and file it with the Florida Democratic Party between February 5, 2024, and March 25, 2024, by 12:00 pm.

STATEMENT OF CANDIDACY

SECTION 1: Candidate Information (Please Type or Print)

Print Name as it appears on your Voter ID card: _____
(Last) (First) (Middle) (Nickname, if any)

Street Address: _____
(Street Address) (City) (State) (Zip code)

Mailing Address (if different): _____

Email Address: _____

Phone (check preferred): Home: _____ Work: _____ Cell: _____

SECTION 2: Delegate Category

I wish to qualify as a candidate for delegate in the following category: District-Level Delegate

SECTION 3: Demographic Information

- Female
- Male
- Employer: _____
- Occupation: _____
- African American
- Asian/Pacific American
- Caucasian
- Hispanic
- Native American (specify tribe): _____
- Other (please specify): _____
- Disability (please specify): _____
- Labor Union: _____
- LGBTQ+
- Senior (65 & up)
- Veteran
- Youth (18-35)

SECTION 4: Party & Leader Information

County: _____ Precinct: _____ 2024 Congressional District: _____ Elected official, public office holder or Party leader title: _____

SECTION 5: Security Information (required for Convention security)

Date of Birth: Mo: _____ Day: _____ Year: _____

PLEDGE OF SUPPORT

I hereby notify the Florida Democratic Party that I wish to be a candidate for District Level Delegate candidate to the 2024 Democratic National Convention pledged to support the following presidential candidate: _____

LOYALTY OATH

I duly affirm and certify that I am a member of the Democratic Party of the United States; that I am a qualified elector of the congressional district as indicated above; that I will not support the election of the opponent of any Democratic nominee; that I will not oppose the election of any Democratic nominee, nor will I support any non-Democrat against a Democrat in any election other than in judicial races; that I am qualified under the Constitution and Laws of the State of Florida and the Charter and Bylaws of the Florida Democratic Party to hold the position as indicated above.

(Signed) X _____ (Date) _____

To be Completed by Party Officers (Please Print)

Form received Date: _____ Time: _____ Person receiving form: _____

