

**Declaration of Candidacy Form**  
*District Level Delegates and Alternates*  
Filing Deadline – December 26, 2015  
Must be received by 5:00PM

***Please Return form by mail or fax to:***  
Ohio Democratic Party  
340 E. Fulton St, Columbus, OH 43215  
Phone (614) 221-6563x 1214 Fax (614) 221-0721  
bdemora@ohiodems.org

I hereby declare my desire to be a candidate for Ohio Delegate to the 2016 Democratic National Convention. I affirm that I am a qualified elector, and a member of the Democratic Party. I will not participate in the nominating processes of any other party for the 2016 elections.

You MUST indicate the candidate of your choice here:

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Your Signature \_\_\_\_\_

*Please print clearly and provide all information below:*

Name (First, MI, Last) \_\_\_\_\_

Voting Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

County \_\_\_\_\_ Congressional District \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Affirmative Action Information**

*Place X where appropriate*

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ Age: 18-35 \_\_\_\_\_ 36-64 \_\_\_\_\_ Over 65 \_\_\_\_\_

African American \_\_\_\_\_ Asian/Pacific Islander \_\_\_\_\_ Native American \_\_\_\_\_

Hispanic: \_\_\_\_\_ LGBT \_\_\_\_\_ Disabled \_\_\_\_\_ Veteran \_\_\_\_\_