

Democratic Party of Virginia
2008 State / Congressional District Convention
Convention Alternate Filing Form

I, the undersigned, certify that I am a Democrat, am a registered voter in _____, 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.

Please Print:

Name _____

Address _____

City _____ Zip Code _____

Phone (H) _____ (O) _____

E-mail _____ Fax _____

Congressional District _____

County or City _____

Precinct / Ward _____

Presidential Candidate Preference _____
(Candidate Name)

Fees: State \$10.00 + District \$____ + Local \$____ = Total \$____

Congressional District, county and city committees may request voluntary administrative fees for each delegate and alternate candidate to the Congressional District Convention. The total may not to exceed \$25.00. No person shall be denied the right to participate in the delegate selection process due to nonpayment of the voluntary administrative fee.

If elected a delegate or alternate to my Congressional District and State Conventions, I understand that, having expressed the above candidate preferences, I will in all good conscience vote in that candidate's caucus on the first ballot at both Conventions.

Signature _____ Date _____

*Authorized and paid for by the Democratic Party of Virginia
Contributions to the Democratic Party of Virginia are not tax deductible.*
