## **Delegate Declaration of Candidacy**

## Please read the following instructions carefully. Applications which are incomplete or improperly submitted may be rejected.

Candidates for District-Level Delegate must file this declaration of candidacy form with the Chair of the Michigan Democratic Party, 606 Townsend, Lansing, MI 48933 by **5:00 pm on April 11, 2024**. Delivery by FAX or email will not be accepted. Candidates must also be members of the Michigan Democratic Party by **April 11, 2024**. There are no exceptions.

Candidates for Party Leader and Elected Official (PLEO) Delegate, at-Large Delegate, or At-Large Alternate must file this declaration of candidacy form with the Chair of the Michigan Democratic Party at 606 Townsend, Lansing, MI 48933 by **5:00 pm on Monday, May 6, 2024**. Delivery by FAX or email will not be accepted. Candidates must also be members of the Michigan Democratic Party by 5:00 pm on Monday, **May 6, 2024**. There are no exceptions. Presidential candidates have the right to approve or reject candidates for delegate or alternate pledged to them.

## **Applicant Information**

Name:		
Gender: 🗆 Male 🛛 🗆 Fem	nale 🛛 🗌 Gender Non-Binary	/Gender Non-Conforming
Home Address:		
City:	Zip: Congression	nal District:
Primary Telephone Numbe	er: E-Mail A	ddress:
Demogra	phic Information (Please ch	eck any that apply)
🗆 African American	🗆 Asian/ Pacific Islander	Hispanic or Latino
□ LGBTQ+	□ Youth (18-35)	Arab American/Chaldean
🗆 Native American	Person with Disabilities	
Candida	te Declaration (You may che	eck more than one)
District-Level Delegate	🗆 At-Large Delegate	🗆 At-Large Alternate
,	d Official (PLEO) Delegate* ate-wide elected official, state legislative lead	der, state legislator, or other state, county and local elected
Cand	idate Declaration (You may	check only one)
🗆 Joe Biden		
🗆 Dean Phillips		
Marianne Williamsor	1	
l am a registered voter in M	ichiaan or will be 18 years of	age and registered to vote in

I am a registered voter in Michigan or will be 18 years of age and registered to vote in Michigan for the November 2024 general election. I declare that all the information that I have provided is true.

Signature
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Date

OFFICE USE ONLY:			
MDP Member ID:	_ Member Renew Date:	Date Received:	