



OFFICE USE: REC'D BY: _____ DATE: _____

Presidential Elector – Statement of Candidacy Form

As a (check one) delegate / alternate to the State Convention, I want to participate in the vote for a particular Presidential candidate as a Presidential Elector. I understand that the Statement of Candidacy form must be filed by **May 7, 2020 at 5 P.M. HST** to the Secretary of the Democratic Party of Hawai'i by email: secretary@hawaiidemocrats.org, in person, or by mail to: PO Box 2041, Honolulu, HI 96805.

Full Name _____ CD _____ Dist. _____ Prct. _____

Address _____

City _____ State _____ Zip _____

Home Phone: _____ Mobile Phone: _____

Email: _____

Male _____ Female _____ Nonbinary _____ (Check one)

We, the undersigned members of the Democratic Party of Hawai'i, hereby nominate the above individual as a candidate for Presidential Elector.

Signature	Print Name	Address	Dist/Prct
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

I, _____, the candidate named herein, do certify that I am a duly qualified and enrolled member of the Democratic Party of Hawai'i and pledge my support to the Democratic Presidential nominee as a Presidential Elector in the 2020 General Election.

Candidate's Signature

Ethnicity (DNC Requirement).
&/or Minority Status*

Date

* May be made public