

# Appendix E



## Presidential Candidate Written Affirmation

Pursuant to Article IV of the Call for the 2020 Democratic National Convention, I hereby affirm that, upon publicly announcing my candidacy for the Democratic nomination for President of the United States in the 2020 election, I am a member of the Democratic Party. I will run as a Democrat, accept the nomination of my Party, and I will serve as a Democrat if elected. I understand that signing this form does not supplant any legal or Party requirement by any state or territory to qualify for ballot placement in that jurisdiction.

Further, I acknowledge that in submitting this form to the National Chairperson of the Democratic National Committee, I am subject to the provisions of Rule 13.K of the *Delegate Selection Rules for the 2020 Democratic National Convention* and Article VI of the *Call for the 2020 Democratic National Convention* that authorize the National Chairperson to determine whether a presidential candidate has established substantial support for their nomination as the Democratic candidate for the Office of the President of the United States, is a bona fide Democrat whose record of public service, accomplishments, public writings and/or public statements affirmatively demonstrate that the candidate is faithful to the interests, welfare and success of the Democratic Party of the United States, and will participate in the Convention in good faith.

\_\_\_\_\_  
Print or Type Candidate's name

\_\_\_\_\_  
Candidate's signature

\_\_\_\_\_  
Date

*Campaign Point of Contact:*

*Name*

*Phone*

*Email*

<i>Name</i>	<i>Phone</i>	<i>Email</i>

### NOTARY AFFIDAVIT

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public, do hereby certify that on this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, personally appeared before me \_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing instrument, and swore and acknowledged to me that they executed the same for the purpose and in the capacity therein expressed, and that the statements contained therein are true and correct.

\_\_\_\_\_  
Notary Public, State of \_\_\_\_\_

Name, Typed or Printed: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_