## Republican Party of Virginia 2020 Quadrennial Convention Delegate (and Alternate Delegate) Filing Form

Candidates for National Delegate and National Alternate Delegate must each submit a completed original version of the relevant filing form to the Chairman of the Republican Party via postal mail, or in person, to be received no earlier than noon January 23, 2020, and no later than 5:00 PM, April 2, 2020. Date of receipt governs. Postmarks do not govern.

Additionally, each candidate for National Delegate and National Alternate Delegate must submit a petition (using the template set forth below) signed by 125 Virginia voters that is notarized in accordance with Virginia statutes on elections, along with a check or proof of electronic payment of a \$250 filing fee payable to the Republican Party of Virginia, Inc.

Candidates seeking election for National Delegate or National Alternate may do so through their respective District Convention or the State Convention, but not both. For information on seeking election though a District Convention, refer to the District's "convention call," the formal document announcing the convention and providing relevant details (for full details, <a href="https://virginia.gop/events/category/official-call/">https://virginia.gop/events/category/official-call/</a>).

The complete rules for election of National Delegates are available at <a href="https://virginia.gop/event/republican-party-of-virginia-2020-quadrennial-convention/">https://virginia.gop/event/republican-party-of-virginia-2020-quadrennial-convention/</a>.

## **Delivery Information:**

- Postal Mail Delivery Address: PO Box 12025, Richmond VA 23241.
- In-Person Delivery Address:115 E Grace St., Richmond VA 23235.

I (full name), state that I:
have enclosed a payment in the amount of \$250.00 payable to "Republican Party of Virginia, Inc";
am in accord with the principles of the Republican Party and intend to support the nominees of the Republican Party and am otherwise qualified under Article I of the Party Plan; and
understand that filing fees are non-refundable; and
understand that if I am elected, I am responsible for paying my own expenses incurred in serving as a Delegate or Alternate Delegate (including, but not limited to travel, accommodation, and meals), which may cost as much as \$350.
My complete voter registration address is:
Signature:
Preferred Mailing Address:
Preferred Phone Number:
Preferred F-mail Address:

## REPUBLICAN PARTY OF VIRGINIA PETITION OF OUALIFIED VOTERS FORM

(Full Name of Candidate for National Delegate or Alternate Delegate)
(Voter Registration Address of Candidate for National Delegate or Alternate Delegate)

We, the qualified voters of the Commonwealth of Virginia, in which the above candidate seeks election as a National Delegate or Alternate Delegate to the 2020 Republican National Convention, signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above at the 2020 Republican Party of Virginia Quadrennial Convention, to be held on May 1-2, 2020, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

## Instructions:

- All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. However, the circulator of each page of this Petition must be a person who is her\himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit on this form that s/he personally witnessed the signature of each voter.
- Each signer must personally sign the petition; however, a signature does not signify any intent to vote for the candidate. A signer may sign petitions for more than one candidate.

RPV	#	Signature of Registered Voter	Residence Address: House number & street name or	Date Signed
Use		(Print Name in Space Below	Rural route and box number; and city/town. PO Box is	(Must be after
		Signature)	not acceptable.	Jan. 1, 2020)
	1	,		,
	_	Sign	Residence	
		Print	City/Town	
	2		- 7	
		Sign	Residence	
		Print	City/Town	
	3		ong, rom	
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Continued from page above. Candidate Name:	Page	of	

Continue additional signatures (as needed) and complete Affidavit.

RPV Use	#	Signature of Registered Voter (Print Name in Space Below Signature)	Residence Address: House number & street name or Rural route and box number; and city/town. PO Box is not acceptable.	Date Signed (Must be after Jan. 1, 2020)
	-	Sign	Residence	
		Print	City/Town	
	-	Sign	Residence	
		Print	City/Town	
		Sign	Residence	
		Print	City/Town	
	1	Sign	Residence	
		Print	City/Town	
	_	Sign	Residence	
		Print	City/Town	
Continu	ue add	litional signatures (as needed) and	d complete Affidavit.	
AFFID	AVIT			
I,			, swear or affirm	that (i) my full
residen	ntial ad	dress is	in t	he
State/C	Commo	onwealth of	; in the County/City/Town of	
			; (ii) I am a legal resident of the United States of America	a; (iii) I am not a
minor;	(iv) I a	m not a felon whose voting rights	have not been restored; and (v) I witnessed the signature	re of each person
who sig	gned th	nis page or its reverse side. I unde	erstand that falsely signing this affidavit is a felony punis	hable by a
maximı	um fine	e up to \$2,500 and/or imprisonme	ent up to ten vears	
THO ATT	<b></b>	ap to \$2,000 and or improcurre	int up to ton youron	
			Signature of Person Circulating the Petition	
		raphically Reproducible o/Seal Below		
INOtaly	Starry	orsear below		
			State of, City/Town of	
			The foregoing instrument was subscribed and sworn l	pefore me this
			day of, 2020, by	
			(Print Name of Person Circulating the Petition)	
Signatu	re of I	Notary		