Wyoming Democratic Party
Caucus Surrogate Affidavit Form
(2 pages)

Part A:

___________________________  _______________________________
Name:                                             E-mail:

____________________________  _______________________________
Address:                                           Home Phone:

____________________________  _______________________________
City/Zip:                                           Mobile Phone:

I certify that I:

• Consider myself a Democrat, and that;
• My name and address are correctly listed above, and that;
• I am registered to vote in my County of residence as a member of the Wyoming Democratic Party, or have early registered to vote as a member of the Wyoming Democratic Party at age 17 in my County and will be 18 and eligible to vote on November 8, 2016, and that;
• I am unable to attend the 2016 Wyoming State Democratic County Caucus on Saturday April 9, 2016 because of my need to participate in observance of my religion, I have responsibilities related to military service, I have a disability, illness, or my work schedule does not allow me to attend the County Caucus;

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<th>For Office Use Only</th>
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<tr>
<td>Precinct</td>
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<tr>
<td>Registered</td>
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<td>Date Received</td>
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Please place my name onto the “Caucus Sign-in Sheet” with the word “Surrogate” on the signature line, and count my vote for delegate allocation for:

______________________________________________________________________

Name of Presidential Candidate I am Supporting

If this candidate does not meet the required threshold to receive delegates at the Caucus, please change preference to:

______________________________________________________________________

Name of Alternative Candidate

______________________________________________________________________

Signature of Voter                                      Date

Part B: (Check one)

• I wish to be considered for the position of delegate to the State Convention, if my candidate or alternate candidate, listed above, is allocated delegates at the County Caucus.

• I do not wish to be considered for the position of Delegate to the State Convention.

Surrogate Affidavit Forms can be downloaded from the State Party website located at wyodems.org

A copy of this form properly completed and signed must be sent either by mail, fax or as a scanned pdf to the State Democratic Party headquarters and must be received no later than Friday, April 1, 2016 at 5:00 pm, this is so that the form may be forwarded to the proper local party organization prior to the Saturday, April 9, 2016 County Caucuses.

Properly completed and signed Surrogate Affidavit Forms must be sent to:
chair@wyodems.org or mailed to:

Wyoming Democratic Party
PO Box 1972  Cheyenne, WY 82003