

# OKGOP NATIONAL DELEGATE NOMINATION FORM 2024

25 Delegates-at-Large and 25 Alternates-at-Large  
3 Delegates and 3 Alternates for each Congressional District

Name \_\_\_\_\_ County \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail \_\_\_\_\_

Business or profession \_\_\_\_\_ Self-employed? \_\_\_\_\_

Check as many of the following Republican activities as are applicable:

<u>ACTIVITY</u>	<u>YEARS</u>
___ Campaign Volunteer Worker	_____
___ College Republicans	_____
___ Congressional District Chairman	_____
___ Congressional District Vice Chairman	_____
___ Congressional District Committee Member	_____
___ County Chairman	_____
___ County Vice Chairman	_____
___ County Executive Committee Member	_____
___ County Committee Member	_____
___ County Treasurer	_____
___ Election Board Member-County	_____
___ Election Board Member-Precinct	_____
___ Elephant Club Member/Minuteman	_____
___ Party Volunteer	_____
___ Precinct Chairman	_____
___ Precinct Vice Chairman	_____
___ Presidential Elector	_____
___ State Committee Member	_____
___ State Budget Committee Member	_____
___ State Executive Committee Member	_____
___ State Finance Committee Member	_____
___ Teenage Republicans	_____
___ Victory/GOTV Volunteer	_____
___ Young Republicans	_____
___ Any other membership	_____

**Discuss in full your activities if you have been active in the following:**

Republican Auxiliary Membership:

Republican Party Financial Support:

Republican Party Volunteer Activities:

Republican Campaign Participation:

Appointments to Boards, Commissions, Etc. Civic Activities:

What are your goals for the Oklahoma Republican Party in the next two years?

What commitments are you personally planning to make to help achieve those goals?

Briefly describe other Republican activities.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you need more space, please staple another sheet to this form.

ALL FORMS MUST BE COMPLETED AND RETURNED no later than **April 15, 2024**, to:

Oklahoma Republican Party

4031 N. Lincoln Boulevard

Oklahoma City, OK 73105

Email: **front-desk@okgop.com cc: stan.stevens@okgop.com**

**NATIONAL DELEGATE/ALTERNATE  
AFFIDAVIT OF ACCEPTANCE**

I \_\_\_\_\_,  
(Name)

residing at \_\_\_\_\_,  
(Address, City, State Zip)

Do hereby certify that, if I am duly elected, I will accept the nomination of Delegate or Alternate Delegate to the Republican National Convention in **Milwaukee, Wisconsin July 15<sup>th</sup> - 18<sup>th</sup> 2024**. Furthermore, I certify that I am a registered voter of the Oklahoma Republican Party.

I also certify that my delegate vote on selection for President of the United States of America at the Republican National Convention shall be cast as provided by Oklahoma Statute 26 O.S. 20-104(G) that reads as follows:

"§26-20-104(G). Each delegate or alternate delegate to the national convention of his political party shall cast their vote on all ballots for the candidate who received this state's vote. If that candidate is for any reason no longer a candidate, the votes of the Oklahoma delegation shall be cast for any candidate of their choice."

**AND**

Oklahoma Statute 26 O.S. 20-105 that reads as follows:

"§26-20-105. Delegates and alternates to file affidavits on voting. No person selected as a delegate or alternate delegate shall qualify to attend the national convention of his political party unless he files with the state central committee of his party a signed affidavit of acceptance stating his name, address, that he is a registered voter of the political party and, pursuant to effectuating the purpose and the result of the Presidential Preferential Primary in this state, that he pledges himself to vote as provided for in Section 4 (now Section 104(G)) of this act."

Any vote cast by a delegate not in accordance with his delegate pledge shall be void.

\_\_\_\_\_  
Signature

STATE OF OKLAHOMA     )  
COUNTY OF OKLAHOMA   )     SS:

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Notary

My commission expires: \_\_\_\_\_ Commission Number: \_\_\_\_\_

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