

Affiliated Local Association Official Report of Delegates and Alternates

DELEGATES PLEASE PRINT OR TYPE IN RANK ORDER OF VOTES RECEIVED

ALTERNATES PLEASE PRINT OR TYPE IN RANK ORDER OF VOTES RECEIVED

IN RANK ORDER OF VOTES RECEIVED	IN RANK ORDER OF VOTES RECEIVED		
1	1		
NAME:	NAME:		
Individual ID No:	Individual ID No:		
E-mail:	E-mail:		
Street Address:	Street Address:		
City: State: Zip:	City: State: Zip:		
ETHNIC GROUP: ☐ Asian ☐ Black ☐ Hispanic ☐ Caucasian	ETHNIC GROUP: ☐ Asian ☐ Black ☐ Hispanic ☐ Caucasian		
☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander ☐ Other Racial or Ethnic Minority ☐ Unknown	☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander☐ Other Racial or Ethnic Minority ☐ Unknown		
2	2		
NAME:	NAME:		
Individual ID No:	Individual ID No:		
E-mail:	E-mail:		
Street Address:	Street Address:		
City: State: Zip:	City:State:Zip:		
ETHNIC GROUP: ☐ Asian ☐ Black ☐ Hispanic ☐ Caucasian ☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander ☐ Other Racial or Ethnic Minority ☐ Unknown	ETHNIC GROUP: ☐ Asian ☐ Black ☐ Hispanic ☐ Caucasiar ☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander ☐ Other Racial or Ethnic Minority ☐ Unknown		
3	3		
NAME:	NAME:		
Individual ID No:	Individual ID No:		
E-mail:	E-mail:		
Street Address:	Street Address:		
City: State: Zip:	Street Address:		
ETHNIC GROUP: Asian Black Hispanic Caucasian	ETHNIC GROUP: Asian Black Hispanic Caucasian		
☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander ☐ Other Racial or Ethnic Minority ☐ Unknown	☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander ☐ Other Racial or Ethnic Minority ☐ Unknown		
4	4		
NAME:	NAME:		
Individual ID No:	Individual ID No:		
E-mail:	E-mail:		
	Street Address:		
Street Address:	Street Address:State:Zip:		
ETHNIC GROUP: ☐ Asian ☐ Black ☐ Hispanic ☐ Caucasian	ETHNIC GROUP: Asian Black Hispanic Caucasian		
American Indian/Alaska Native Native Hawaiian/Pacific Islander	☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander		
Other Racial or Ethnic Minority Unknown	Other Racial or Ethnic Minority Unknown		

President's or Election Chairperson's SIGNATURE REQUIRED (SIGN HERE) X_____

IMPORTANT!: Please return official form along with a <u>SAMPLE COPY OF BALLOT</u> used in the election <u>OR OFFICIAL MINUTES</u> from an association general meeting indicating winners of an acclamation election to: Elections & Conference Coordinator, Ohio Education Association, Box 2550, Columbus, Ohio 43216 by <u>October 15, 2019</u>. For overnight delivery only, please use <u>225 E. Broad St., Columbus, OH 43215</u>. THIS FORM MAY BE REPRODUCED AS NEEDED OR PRINTED FROM THE OEA WEBSITE TO ACCOMMODATE LOCAL DELEGATES ALLOCATED TO YOUR LOCAL. <u>NOTE</u>: The ten (10) digit individual ID number is located on your OEA membership card and on all OEA membership rosters.

2019-2020 OEA Representative Assemblies

DELEGATE ELECTION RESULTS

	NAME	OF LOC	A L	ASSOCIATION			
Ple	ease record the following information re	egarding the elect	ion:				
•	Date of Notice of Election (as mand to members last known home address						
•	Date of Election (must be no sooner than 15 days after Notice of Election sent)						
•	Date of ballot count (or tally)						
-	Total number of members in local association						
•	Total members who voted						
	*****TO AVOID THE LANDRU	IM-GRIFFIN AC	ст с	COULD HAVE SERIOUS CONSEQUE	NCES****		
	List DELEGATES ONLY In order of votes received	Number of votes rec'd by each CANDIDATE		List ALTERNATES ONLY In order of votes received	Number of votes rec'd by each DELEGATE		
1	DELEGATE			1 ALTERNATE			
2	DELEGATE			2 ALTERNATE			
3	DELEGATE		;	3 ALTERNATE			
4	DELEGATE			4 ALTERNATE			
	President, President-Elect or c virtue of office.	other designate	d of	TES" column denotes the Preside ficer as having automatic delegate sas automatic delegate "by virtue" langer/Bylaws:	status by		
	Section, which states	that the Pres	ider	, contains language in Article nt and or Vice President/President- atic delegates to the OEA Repres	Elect, or		
	ertify that the above election in ue:	formation and	all	statements contained in this docu	iment are		
				X			
				XLocal Association Preside	nt		

<u>DEADLINE INFORMATION:</u> YOU MUST SUBMIT THIS OFFICIAL FORM, COMPLETED FRONT AND BACK WITH NUMBER OF VOTES RECEIVED AND APPROPRIATE SIGNATURES, TO THE OEA HEADQUARTERS **NO LATER THAN OCTOBER 15, 2019**. YOU MUST ATTACH A SAMPLE COPY OF THE BALLOT USED IN THE ELECTION, OR MEETING MINUTES FROM AN ALL MEMBER MEETING WHERE THE ELECTION WAS HELD. FAILURE TO MEET THESE CONSTITUTIONAL REQUIREMENTS MAY RESULT IN THE DENIAL OF DELEGATE PRIVILEGES FOR YOUR ELECTED ASSOCIATION DELEGATES BY THE OEA CREDENTIALS COMMITTEE.