



ELECTION RESULTS

Delegates to Western Ohio Education Association
2016 Fall Forum and 2017 Spring Representative Assembly
 certify that the following delegate(s) and alternate(s) representing the:

NAME OF LOCAL ASSOCIATION

Have been elected by members of the Association, in a secret ballot election conducted on __/__/16

WOEA <u>DELEGATES</u> ONLY	VOTES	WOEA <u>DELEGATES</u> ONLY	VOTES
1. _____	(__)	12. _____	(__)
2. _____	(__)	13. _____	(__)
3. _____	(__)	14. _____	(__)
4. _____	(__)	15. _____	(__)
5. _____	(__)	16. _____	(__)
6. _____	(__)	17. _____	(__)
7. _____	(__)	18. _____	(__)
8. _____	(__)	19. _____	(__)
9. _____	(__)	20. _____	(__)
10. _____	(__)	21. _____	(__)
11. _____	(__)	22. _____	(__)

WOEA <u>ALTERNATES</u> ONLY	VOTES	WOEA <u>ALTERNATES</u> ONLY	VOTES
1. _____	(__)	12. _____	(__)
2. _____	(__)	13. _____	(__)
3. _____	(__)	14. _____	(__)
4. _____	(__)	15. _____	(__)
5. _____	(__)	16. _____	(__)
6. _____	(__)	17. _____	(__)
7. _____	(__)	18. _____	(__)
8. _____	(__)	19. _____	(__)
9. _____	(__)	20. _____	(__)
10. _____	(__)	21. _____	(__)
11. _____	(__)	22. _____	(__)

Complete the following paragraph **ONLY** if your local has automatic delegate "by virtue" language regarding local association officers in your Constitution/Bylaws.

I certify that all statements contained in this document are true: _____
Local Association Presiden

Our local association's constitution, dated _____ contains language in Article ____, Section ____, which states the President and or Vice President/President Elect will serve as automatic delegates to the WOE A Representative Assembly by virtue of office. An **ASTERICK (*)** in the "**NUMBER OF VOTES**" column denotes the President and/or Vice President/President-Elect as having automatic delegate status by virtue of office.

DEADLINE INFORMATION:

YOU MUST SUBMIT THIS OFFICIAL FORM, COMPLETED FRONT AND BACK WITH NUMBER OF VOTES RECEIVED AND APPROPRIATE SIGNATURES, TO THE WOE A OFFICE NO LATER THAN OCTOBER 15, 2016. YOU MUST ATTACH A SAMPLE COPY OF THE BALLOT USED IN THE ELECTION! FAILURE TO MEET THESE CONSTITUTIONAL REQUIREMENTS MAY RESULT IN THE DENIAL OF DELEGATE PRIVILEGES FOR YOUR ELECTED ASSOCIATION DELEGATES BY THE WOE A CREDENTIALS COMMITTEE.



**Affiliated Local Association Official Report of Delegates and Alternates
to the 2016 Fall Forum and 2017 Spring Representative Assembly of
Western Ohio Education Association**

Local Association Name _____		Electoral Unit _____	
President _____			
Pres. Home Phone _____	Pres. School Phone _____	E-Mail _____	

List DELEGATE NAMES ONLY in the section below, IN RANK ORDER OF VOTES RECEIVED.

1.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
2.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
3.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
4.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
5.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
6.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
7.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
8.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
9.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
10.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
11.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
12.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
13.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
14.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
15.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
16.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
17.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
18.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
19.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
20.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
21.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
22.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____

List ALTERNATE NAMES ONLY in the section below, IN RANK ORDER OF VOTES RECEIVED.

1.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
2.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
3.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
4.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
5.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
6.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
7.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
8.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
9.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
10.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
11.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
12.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
13.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
14.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
15.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
16.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
17.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
18.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
19.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
20.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____
21.	NAME _____	ADDRESS _____	CITY _____	ZIP _____	EMAIL _____