



OHIO APPORTIONMENT BOARD
APPORTIONMENT PLAN SUBMISSION FORM

Date of Submission: 9-23-11

Name: Sarah Cherry

Organization (If Applicable): House and Senate Democratic Caucuses

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Pursuant to Rule 011-1-09 -- please indicate what components your submission includes.

A Complete Ohio House of Representatives Map

A Complete Ohio Senate Map:

Proposed Minority Districts:

- If submitting minority districts only – include boundaries of all districts in the county in which minority districts are proposed

10 paper copies of plan legal definitions

10 paper copies of plan visual representations

Electronically-stored copy of plan legal definition - Block equiv file

Electronically-stored copy of plan visual representation

An equivalency file or similar electronic file (not required)

Please indicate format of electronically-stored copy: comma seperated values .csv

Signature: Sarah Cherry

THIS BOX IS FOR OFFICE USE ONLY:

Received By: Laura Clement Date of Receipt: 9.23.11 11:55 a.m.

Confirmation of plan components by Joint Secretaries:
Paul D. Rain Udner H H

*** NOTE: LEGAL DEFINITIONS TO BE DELIVERED LATER**