

# Recommendation for **Full Term Appointment**

as a

## Member of Board of Elections

(For unexpired term use Form # 301)

\_\_\_\_\_ County

\_\_\_\_\_, Ohio \_\_\_\_\_, 20\_\_\_\_\_.  
City Month/Day Year

The Chairperson and Secretary of the  **Dem.**  **Rep.** Party Executive Committee of

\_\_\_\_\_ County, Ohio, certify that at a meeting of the Executive Committee,

held on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, it was resolved by a majority vote of the members that

- Mr. \_\_\_\_\_
- Mrs. \_\_\_\_\_
- Ms. \_\_\_\_\_

### Political Party Affiliation

- Dem.
- Rep. Birthdate \_\_\_\_\_

\_\_\_\_\_  
Street and Number or Rural Route

\_\_\_\_\_  
City or Village Zip Code

Residence Telephone: \_\_\_\_\_

Office Telephone: \_\_\_\_\_

who is an elector qualified and competent to perform the duties of such office, be and is hereby recommended for appointment as a member of the Board of Elections for the full term beginning March 1, 2016 and ending February 28, 2019.

\_\_\_\_\_  
Signature of Chairperson

**The address of the Chairperson and Secretary must be provided.**

\_\_\_\_\_  
Address

Send to:

Secretary of State's Office - Elections Div.  
Attn: Myra Hawkins Newbern  
P. O. Box 2828  
Columbus, OH 43216

\_\_\_\_\_  
Signature of Secretary

\_\_\_\_\_  
Address