

Appointment of Chairperson, Director or Deputy Director to Board of Elections

The board of elections of the county indicated below met on the date indicated below and appointed the following as chairperson, director or deputy director.

County Name	<input type="text"/>	If the person appointed is succeeding another individual, please complete the shaded section below. Otherwise, leave blank.
Position	<input type="text"/>	
Board Meeting Date <small>(MM/DD/YYYY)</small>	<input type="text"/>	
Effective Date of Appointment <small>(MM/DD/YYYY)</small>	<input type="text"/>	
		Appointed to Succeed <input type="text"/>
		The former position holder:
		Date of position vacancy <small>(MM/DD/YYYY)</small> <input type="text"/>

Appointee Name, Residence Address, and Other Information

Courtesy Title	<input type="text"/>	Street Address	<input type="text"/>
First Name	<input type="text"/>	City	<input type="text"/>
Middle Name	<input type="text"/>	State	<input type="text"/>
Last Name	<input type="text"/>	Zip Code	<input type="text"/>
Suffix	<input type="text"/>	Home Phone <small>(Numbers and hyphens only)</small>	<input type="text"/>
Date of Birth <small>(MM/DD/YYYY)</small>	<input type="text"/>	Cell/Mobile Phone <small>(Numbers and hyphens only)</small>	<input type="text"/>
Political Party Affiliation	<input type="text"/>	Office Phone <small>(Numbers and hyphens only)</small>	<input type="text"/>
		Email Address	<input type="text"/>

Mailing Address Information

Do you receive your mail at an address which is different than the residence address provided above? If yes, please provide your mailing address in the space provided below.

Instructions for Submission

The signed and completed form must be transmitted to the Ohio Secretary of State by one of the following methods:

Email to: MNewbern@ohiosecretaryofstate.gov

Mail to: Ohio Secretary of State
Attn: Myra Newbern, Elections Division
PO Box 2828
Columbus, OH 43216

Director Signature **(Required)**