

ELECTION PROCEDURES MANUAL

for

CSEA LOCAL AND UNIT
ELECTION COMMITTEES

Part 2: Forms

A Companion to the Procedures



LOCAL 1000, AFSCME, AFL-CIO
Mary E. Sullivan, President

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2022 Edition

Prepared by:
CSEA Statewide Election Committee

**ALL PAGES IN THIS MANUAL ARE
PERFORATED FOR YOUR USE**

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SAMPLE SCHEDULES

We have provided 3 schedules each for Mail Ballot Elections and Ballot Box Elections/Voting Machine/Drive-Up Elections.

You should choose the appropriate schedule that best fits with the date on which you plan to start your election process (See Election Manual Part 1: Procedures, for further instruction).

S-1

Schedule to Hold Mail Ballot Election (*Schedule 1*)

(You may choose a schedule that fits your timeframe on pp. 1-6 here, or create your own schedule using the guidelines on pp. 7-9 in the Part 1 Procedures Manual and on p. 6A here)

DATE	EVENT
Mar 7	Election Committee posts/mailed/emails Nomination Notice, Election Schedule, Standing Rules & Regulations, and Notice Regarding Campaigning. <i>(Must be at least 15 days before the start of the nomination period.)</i>
Mar 23 – Apr 6	Nomination Period (<i>Applications available</i>) (<i>Two week minimum/Four week maximum.</i>)
Apr 1	Voter Eligibility Date
Apr 6	Deadline for receipt of Candidate Applications
Apr 7	Deadline for Notifications to Successful Candidates/Ineligible Nominees <i>(The day after the close of the nomination period.)</i>
Apr 14	Deadline for Name Confirmation and Appearance on ballot; Declination Deadline
Apr 15	Drawing for placement on ballot <i>(The day after confirmation/declination deadline.) (One day.)</i>
Apr 15	Posting/Emailing of Candidate Names and order of ballot position <i>(Immediately after drawing.)</i>
Apr 29	Mailing Notice of Election <i>(at least 15 days prior to voting, in private sector; at least 5 days before voting, in public sector)</i>
May 16	Ballots mailed <i>(Earliest date based on Local/Unit Constitutions.) (Must be out for a minimum of 21 days.)</i>
May 23	Requests for replacement ballots <i>(One week after ballots are mailed.)</i>
Jun 8	Ballots Due and Talled
Jun 10	Results Certified, Announced and Posted/Mailed/Emailed <i>(Within 48 hours of the end of the balloting period.)</i>
Jun 20	Results filed with Statewide Secretary <i>(Within 10 days after results are announced.)</i>
Jun 20	End of Results Protest Period <i>(Ten days after results are announced.)</i>

S-2

Schedule to Hold Mail Ballot Election (Schedule 2)

(You may choose a schedule that fits your timeframe on pp. 1-6 here, or create your own schedule using the guidelines on pp. 7-9 in the Part 1 Procedures Manual and on p. 6A here)

DATE	EVENT
Mar 18	Election Committee posts/mailed/emails Nomination Notice, Election Schedule, Standing Rules & Regulations, and Notice Regarding Campaigning. <i>(Must be at least 15 days before the start of the nomination period.)</i>
Apr 1	Voter Eligibility Date
Apr 4 – Apr 18	Nomination Period <i>(Applications available) (Two week minimum/Four week maximum.)</i>
Apr 18	Deadline for receipt of Candidate Applications
Apr 19	Deadline for Notifications to Successful Candidates/Ineligible Nominees <i>(The day after the close of the nomination period.)</i>
Apr 20	Deadline for Name Confirmation and Appearance on ballot; Declination Deadline
Apr 21	Drawing for placement on ballot <i>(The day after confirmation/declination deadline.) (One day.)</i>
Apr 22	Posting/Emailing of Candidate Names and order of ballot position <i>(Immediately after drawing.)</i>
May 4	Mailing Notice of Election <i>(at least 15 days prior to voting, in private sector; at least 5 days before voting, in public sector)</i>
May 19	Ballots mailed <i>(Must be out for a minimum of 21 days.)</i>
May 26	Requests for replacement ballots <i>(One week after ballots are mailed.)</i>
Jun 9	Ballots Due and Tallied
Jun 11	Results Certified, Announced and Posted/Mailed/Emailed <i>(Within 48 hours of the end of the balloting period.)</i>
Jun 21	Results filed with Statewide Secretary <i>(Within 10 days after results are announced.)</i>
Jun 21	End of Results Protest Period <i>(Ten days after results are announced.)</i>

S-3

Schedule to Hold Mail Ballot Election (*Schedule 3*)

(You may choose a schedule that fits your timeframe on pp. 1-6 here, or create your own schedule using the guidelines on pp. 7-9 in the Part 1 Procedures Manual and on p. 6A here)

DATE	EVENT
Mar 28	Election Committee posts/mailed/emails Nomination Notice, Election Schedule, Standing Rules & Regulations, and Notice Regarding Campaigning. <i>(Must be at least 15 days before the start of the nomination period.)</i>
Apr 1	Voter Eligibility Date
Apr 13 - Apr 27	Nomination Period <i>(Applications available) (Two week minimum/Four week maximum.)</i>
Apr 27	Deadline for receipt of Candidate Applications
Apr 28	Deadline for Notification to Successful Candidates/Ineligible Nominees <i>(The day after the close of the nomination period.)</i>
May 4	Deadline for Name Confirmation and Appearance on ballot; Declination Deadline
May 5	Drawing for placement on ballot <i>(The day after confirmation/declination deadline.) (One day.)</i>
May 6	Posting/Emailing of Candidate Names and order of ballot position <i>(Immediately after drawing.)</i>
May 9	Mailing Notice of Election <i>(at least 15 days prior to voting, in private sector; at least 5 days before voting, in public sector)</i>
May 24	Ballots mailed <i>(Must be out for a minimum of 21 days.)</i>
May 31	Requests for replacement ballots <i>(One week after ballots are mailed.)</i>
Jun 15	Ballots Due and Talled <i>(Last day per constitution)</i>
Jun 17	Results Certified, Announced and Posted/Mailed/Emailed
Jun 27	Results filed with Statewide Secretary <i>(Within 10 days after results are announced.)</i>
Jun 27	End of Results Protest Period <i>(Ten days after results are announced.)</i>

S-7

Schedule to Hold On-Site Election (Ballot Box/Voting Machine/Drive-Up) (Schedule 1)

(You may choose a schedule that fits your timeframe on pp. 1-6 here, or create your own schedule using the guidelines on pp. 7-9 in the Part 1 Procedures Manual and on p. 6A here)

DATE	EVENT
Mar 14	Election Committee posts/mails/emails Nomination Notice, Election Schedule, Standing Rules & Regulations, and Notice Regarding Campaigning. <i>(Must be at least 15 days before the start of the nomination period.)</i>
Mar 30–Apr 13	Nomination Period <i>(Applications available) (Two week minimum/Four week maximum.)</i>
Apr 1	Voter Eligibility Date
Apr 13	Deadline for receipt of Candidate Applications
Apr 14	Deadline for Notifications to Successful Candidates/Ineligible Nominees <i>(The day after the close of the nomination period.)</i>
Apr 20	Deadline for Name Confirmation and Appearance on ballot; Declination Deadline
Apr 21	Drawing for placement on ballot <i>(The day after confirmation/declination deadline.) (One day.)</i>
Apr 22	Post/Mail/Email of Candidate Names and order of ballot position <i>(Immediately after drawing.)</i>
Apr 29	Post/Mail/Email Notice of Election to members <i>(at least 15 days before voting, in private sector; at least 5 days before voting, in public sector)</i>
May 9	Absentee Ballots Available <i>(At least 5 days before onsite election)</i>
May 16	Onsite Election Held and Ballots Tallied; Absentee Ballots due.
May 18	Results Certified, Announced and Posted <i>(Within 48 hours of the end of the balloting period.)</i>
May 28	Results filed with Statewide Secretary <i>(Within 10 days after results are announced.)</i>
May 28	End of Results Protest Period <i>(Ten days after results are announced.)</i>

S-8

Schedule to Hold On-Site Election (Ballot Box/Voting Machine/Drive-Up) (Schedule 2)

(You may choose a schedule that fits your timeframe on pp. 1-6 here, or create your own schedule using the guidelines on pp. 7-9 in the Part 1 Procedures Manual and on p. 6A here)

DATE	EVENT
Mar 28	Election Committee posts/mails/emails Nomination Notice, Election Schedule, Standing Rules & Regulations, and Notice Regarding Campaigning. <i>(Must be at least 15 days before the start of the nomination period.)</i>
Apr 1	Voter Eligibility Date
Apr 13-Apr 27	Nomination Period <i>(Applications available)</i> <i>(Two week minimum/Four week maximum.)</i>
Apr 27	Deadline for receipt of Candidate Applications
Apr 28	Deadline for Notifications to Successful Candidates/Ineligible Nominees <i>(The day after the close of the nomination period.)</i>
Apr 29	Deadline for Name Confirmation and Appearance on ballot; Declination Deadline
May 4	Drawing for placement on ballot <i>(The day after confirmation/declination deadline.)</i> <i>(One day.)</i>
May 5	Post/Mail/Email Candidate Names and order of ballot position <i>(Immediately after drawing.)</i>
May 20	Post/Mail/Email Notice of Election to members <i>(at least 15 days before voting, in private sector; at least 5 days before voting, in public sector)</i>
May 27	Absentee Ballots Available <i>(At least 5 days before onsite election)</i>
Jun 6	Onsite Election Held and Ballots Tallied; Absentee Ballots due
Jun 8	Results Certified, Announced and Posted/Mailed/Emailed <i>(Within 48 hours of the end of the balloting period.)</i>
Jun 18	Results filed with Statewide Secretary <i>(Within 10 days after results are announced.)</i>
Jun 18	End of Results Protest Period <i>(Ten days after results are announced.)</i>

S-9

Schedule to Hold On-Site Election (Ballot Box/Voting Machine/Drive-Up) (Schedule 3)

(You may choose a schedule that fits your timeframe on pp. 1-6 here, or create your own schedule using the guidelines on pp. 7-9 in the Part 1 Procedures Manual and on p. 6A here)

DATE	EVENT
Apr 1	Voter Eligibility Date
Apr 5	Election Committee posts/mails/emails Nomination Notice, Election Schedule, Standing Rules & Regulations, and Notice Regarding Campaigning. <i>(Must be at least 15 days before the start of the nomination period.)</i>
Apr 21-May 5	Nomination Period <i>(Applications available) (Two week minimum/Four week maximum.)</i>
May 5	Deadline for receipt of Candidate Applications
May 6	Deadline for Notifications to Successful Candidates/Ineligible Nominees <i>(The day after the close of the nomination period.)</i>
May 12	Deadline for Name Confirmation and Appearance on ballot; Declination Deadline
May 13	Drawing for placement on ballot <i>(The day after confirmation/declination deadline.) (One day.)</i>
May 13	Post/Mail/Email Candidate Names and order of ballot position <i>(Immediately after drawing);</i>
May 27	Post/Mail/Email Notice of Election to members <i>(at least 15 days before voting, in private sector; at least 5 days before voting, in public sector)</i>
Jun 8	Absentee Ballots Available <i>(At least 5 days before onsite election)</i>
Jun 15	Onsite Election Held and Ballots Tallied <i>(Latest date based on Local/Unit Constitutions);</i> Absentee Ballots due
Jun 17	Results Certified, Announced and Posted/Mailed/Emailed <i>(Within 48 hours of the end of the balloting period.)</i>
Jun 27	Results filed with Statewide Secretary <i>(Within 10 days after results are announced.)</i>
Jun 27	End of Results Protest Period <i>(Ten days after results are announced.)</i>

S-10

BLANK SCHEDULE FORM

(If a schedule on pp. 1-6 does not fit your timeframe, you may use this schedule and fill in the desired dates.)

DATE	EVENT
Apr 1	Voter Eligibility Date
_____	Election Committee posts/mails/emails Nomination Notice, Election Schedule, Standing Rules & Regulations, and Notice Regarding Campaigning. <i>(Must be at least 15 days before the start of the nomination period.)</i>
_____	Nomination Period Begins <i>(Applications available)</i> <i>(Minimum two weeks; maximum four weeks.)</i>
_____	Nomination Period Deadline for Candidate Applications
_____	Deadline for Notifications to Successful Candidates/Ineligible Nominees <i>(within 2 days after Nomination Period Deadline)</i> <i>(no election necessary for those elected/unopposed.)</i>
_____	Declination deadline; deadline for name confirmation; <i>(5-7 days after Nomination Period deadline.)</i>
_____	Draw for position on Ballot and Post/mail/email notices of candidates' names and ballot position <i>(1 day after Declination deadline)</i>
_____	Post/Mail/Email Notice of Election <i>(at least 15 days prior, in private sector);</i>
_____	Ballots mailed (in mail ballot election) <i>(at least 21 days prior the date ballots are due and tallied)</i>
_____	Replacement ballots available (in mail ballot election) <i>(One week after ballots are mailed.)</i>
_____	Post/Mail/Email Notice of Election <i>(at least 5 days prior, in public sector);</i>
_____	Absentee Ballots available (on-site election) <i>(at least five days prior)</i>
_____	On-site Voting Day and Tally; Mail Ballot Deadline and Tally <i>(a date between May 15 and June 15.)</i>
_____	Results Certified, Announced and Posted/Mailed/Emailed <i>(Within 48 hours of the end of the balloting period.)</i>
_____	Results filed with Statewide Secretary <i>(Within 10 days after results are announced.)</i>
_____	End of Results Protest Period <i>(Ten days after results are announced.)</i>

NOMINATION FORMS

M-1

APPLICATION FOR ELECTION TO OFFICE

NO APPLICATION WILL BE CONSIDERED UNLESS THE QUALIFICATIONS LISTED BELOW ARE MET AND THE CERTIFICATION STATEMENT IS SIGNED.

"Member in Good Standing" means that you have fully paid your dues continuously without interruption since June 1 of last year. If you have been on leave from payroll and accepted a gratuitous (dues free) membership status at any time since June 1 of last year, with the exception of military service, you are NOT a member in good standing for election purposes in this election.

If you have any questions regarding your status, you may seek clarification by calling the Membership Department at 1-800-342-4146, ext. 1334.

Name: _____
(First, Middle Initial, Last, Suffix if any)

10-digit CSEA ID Number: _____

Name of the office I am seeking is: _____

For Local -or- Unit -or- Section office (check one)

Region#: _____ Local# & Name: _____

Unit#Section# & Name (if applicable): _____

Residence address: _____

Work Site address: _____

Phone Numbers: Work: _____ Home: _____

Cell: _____

Personal Email: _____

<p>I CERTIFY THAT I have been a member in good standing of the applicable CSEA Local/Unit/Section named above for which I am seeking office, since June 1 of last year; I have not been a member of a competing labor association or union since June 1 of last year; I am not currently serving a disciplinary penalty imposed by the CSEA Judicial Board; and I am not currently the subject of a bonding claim by the Association or disqualified from being covered by the Association's surety bond.</p>
--

(Signature)

(Date)

M-2

SLATE APPLICATION FOR ELECTION TO OFFICE

Page__ of__

NO APPLICATION WILL BE CONSIDERED UNLESS THE QUALIFICATIONS LISTED BELOW ARE MET AND THIS FORM IS SIGNED BY EACH CANDIDATE.

(***Attach additional sheets if necessary.***)

“Member in Good Standing” means that you have fully paid your dues continuously without interruption since June 1 of last year. If you have been on leave from payroll and accepted a gratuitous (dues free) membership status at any time since June 1 of last year, with the exception of military service, you are NOT a member in good standing for election purposes in this year's upcoming elections. If you have any questions regarding your status, you may seek clarification by calling the Membership Department at 1-800-342-4146, ext. 1334.

WE CERTIFY THAT (1) we consent to run on the slate named below; and (2) we have been members in good standing of the applicable CSEA Local/Unit/Section named below for which we are seeking office, since June 1 of last year; we have not been members of a competing labor association or union since June 1 of last year; we are not currently serving a disciplinary penalty imposed by the CSEA Judicial Board; and we are not currently the subject of a bonding claim by the Association or disqualified from being covered by the Association's surety bond.

➤ The slate wishes to qualify for (*check one*) Local Office *-or-* Unit Office *-or-* Section Office.

➤ Name of Slate: _____ slate.
(Slate Name*)

** The slate name shall not contain the unit, local, section or region number as any part of the slate name. No person may appear twice on the slate, i.e. as an officer and as a delegate candidate.*

Please complete the following properly depending on the position you are running for:

Name: _____	Office Sought: _____
Region#: _____	10-digit CSEA ID Number: _____
Local# & Name: _____	
Unit#/Section# & Name (<i>if applicable</i>): _____	
Residence: _____	Work Site: _____
Phone Numbers: Work: _____	Home: _____ Cell: _____
Personal Email: _____	
_____	_____
Signature	Date

-OVER-

M-2

SLATE APPLICATION (Continued)

Page __ of __

Name: _____ **Office Sought:** _____
10-digit CSEA ID Number: _____
Region#: _____ Local#: _____ Unit#: _____ / Section#: _____
Residence: _____ Work Site: _____
Phone Nos.: Work: _____ Home: _____ Cell: _____
Personal Email: _____

Signature Date

Name: _____ **Office Sought:** _____
10-digit CSEA ID Number: _____
Region#: _____ Local#: _____ Unit#: _____ / Section#: _____
Residence: _____ Work Site: _____
Phone Nos.: Work: _____ Home: _____ Cell: _____
Personal Email: _____

Signature Date

Name: _____ **Office Sought:** _____
10-digit CSEA ID Number: _____
Region#: _____ Local#: _____ Unit#: _____ / Section#: _____
Residence: _____ Work Site: _____
Phone Nos.: Work: _____ Home: _____ Cell: _____
Personal Email: _____

Signature Date

Name: _____ **Office Sought:** _____
10-digit CSEA ID Number: _____
Region#: _____ Local#: _____ Unit#: _____ / Section#: _____
Residence: _____ Work Site: _____
Phone Nos.: Work: _____ Home: _____ Cell: _____
Personal Email: _____

Signature Date

Name: _____ **Office Sought:** _____
10-digit CSEA ID Number: _____
Region#: _____ Local#: _____ Unit#: _____ / Section#: _____
Residence: _____ Work Site: _____
Phone Nos.: Work: _____ Home: _____ Cell: _____
Personal Email: _____

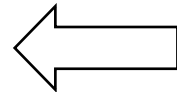
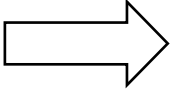
Signature Date

M-3

CSEA NOMINATION NOTICE

_____ (LOCAL) (UNIT)

Positions to be elected are listed below [*list positions below*]:



▶ **NOMINATION PERIOD BEGINS ON** _____
(DATE)

▶ **APPLICATIONS FOR ELECTION TO OFFICE ARE AVAILABLE FROM:**

Name:

Location:

Telephone Number:

When (dates & time):

Email:

▶ Applications for Election to Office will not be available until the first day of the nomination period.

▶ **COMPLETED APPLICATIONS MUST BE RECEIVED NO LATER THAN**

_____ **ON** _____ **BY:**
(TIME) (DATE)

Name:

Location:

Telephone Number:

Email:

Fax Number:

If you are a current officer and you wish to run for office, you MUST follow the nomination guidelines and procedures, including submitting an Application for Election to Office. Otherwise, your term will expire on June 30.

CSEA ELIGIBILITY REQUIREMENTS

To be eligible to seek office, a member must meet the following requirements:

- be at least 18 years of age;
- be a member in good standing of the (Local) (Unit) since June 1 of last year;
- shall not be a member of a competing labor association or union since June 1 of last year;
- shall not currently be serving a disciplinary penalty imposed by the Judicial Board of CSEA; and
- must not have been the subject of a bonding claim by the Association or disqualified from being covered by the Association's surety bond.

PROTESTS

Any member believing himself/herself aggrieved by any aspect of the nomination or election process may file a written protest postmarked or electronically with the appropriate supervising Election Committee as set forth below within ten (10) calendar days after the member knew or should have known of the act or omission. The supervising election committee will send all other candidates affected by the protest a copy of the protest and give adequate time for responses.

Local Election Protests: To be filed with Statewide Election Committee and simultaneously with the Local Election Committee. Contact the Statewide Election Committee for more information at 1-800-342-4146, ext. 1447.

Unit Election Protests: To be filed with Local Election Committee and simultaneously with the Unit Election Committee. Contact your Local Election Committee for more information.

N-9

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME, AFL-CIO

SLATE WITHDRAWAL

THE PERSON LISTED BELOW SHOULD BE REMOVED AS CANDIDATE FOR

_____ ON THE _____ SLATE.
(Office or Position) (Name)

(Print Name)

(10-digit CSEA ID #)

(Region#/Local#/Unit#)

THE REASON FOR THE CANDIDATE'S REMOVAL FROM THE SLATE IS:

- _____ **INVOLUNTARY**
- _____ Candidate's death
- _____ Candidate's extended illness/disability
- _____ Candidate's promotion/transfer out of the Unit/Local
- _____ Candidate's resignation from applicable employment
- _____ Candidate's extended leave of absence from employment

- _____ Other circumstance beyond candidate's direct control
- Specify: _____
- _____
- _____

- _____ **VOLUNTARY:**
- Specify: _____
- _____

Signature of candidate or candidate representative

Relationship to candidate

Date

N-10

INELIGIBILITY OF APPLICANT

PURPOSE: To inform the applicant that he/she did not meet the candidate requirements for any of the reasons listed below.

Date

Name
Address
City, State Zip

Dear _____:

I am sorry to inform you that your nominating application for office cannot be considered by the Election Committee because of the following (*check applicable below*):

____ You have not been a member in good standing of the (Local) (Unit) (Section) since June 1st of last year.

____ You are currently serving a Judicial Board Penalty and are ineligible to run for office.

____ You are currently a member of a competing labor union organization since June 1st of last year.

____ You are currently the subject of a bonding claim by the Association or disqualified from being covered by the Association's surety bond.

____ Your or application was received after the deadline date.

____ Other: _____

Very truly yours,

_____, Chairperson
Election Committee

N-12

SUCCESSFUL APPLICANT

PURPOSE: To inform the applicant that he/she has qualified for a place on the ballot.

Date

Name
Address
City, State Zip

Dear _____:

Congratulations, you have qualified for a place on the ballot for the position of _____ in the (Local) (Unit) (Section) election.

If you wish to decline, you must notify _____ in writing no later than _____ at the address listed below.
(Name of Chairperson)
(Date)

Your name will appear on the ballot as it appears above on this letter. If you wish to make any corrections, you must notify _____ in writing no later than _____ at the following address:
(Name of Chairperson)
(Date)

(Address)

The Election Committee will hold a meeting on _____, at _____ for the purpose
(Date and Time)
(Location)

of conducting a drawing to determine your position on the ballot. The Chairperson will draw on your behalf. You may attend this meeting at your own expense or you may send a proxy, who is a member in good standing, with a written authorization. You will be required to follow all public health social distancing guidelines and properly wear a facial mask.

Very truly yours,

_____, Chairperson
Election Committee

N-13

UNOPPOSED SUCCESSFUL APPLICANT

PURPOSE: To inform the applicant that he/she is the only candidate who has qualified for the office.

Date

Name
Address
City, State Zip

Dear _____:

Congratulations, this is to advise that you are the only candidate who has qualified for the office of _____ and are deemed elected to the office of _____.

[Check one:]

_____ Your name will appear on the election ballot with the notation “unopposed/elected.”

_____ In accordance with election procedures, balloting is not required, when all candidates are elected/unopposed.

Very truly yours,

_____, Chairperson
Election Committee

N-14

SIGN-IN SHEET FOR OBSERVERS DRAWING FOR POSITION ON BALLOT

_____ (LOCAL) (UNIT)

Date _____ Time _____

Location _____

* * PLEASE PRINT CLEARLY. * *

<u>Name</u>	<u>10-digit CSEA ID #</u>	<u>Candidate, or Proxy for Candidate</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____
15.	_____	_____
16.	_____	_____
17.	_____	_____

N-15

DRAWING FOR POSITION ON BALLOT *(with slates and independents)*

_____ (Local) (Unit)

Date _____

The following shows the order in which to draw (by presidential candidate in order by last name):

_____ **LIBERTY SLATE:**

Betty Brown (President) ← Brown draws first
Peter Peck (1st VP)
George Green (2nd VP)
Sue Bee (3rd VP)
Martin Jones (4th VP)
Jackie Jetson (Secretary)
Ann Card (Treasurer)
Forest Tree (Delegate)
Ruth Booth (Delegate)

SAMPLE

_____ **PRESIDENT:**

Pearl Button ← Button draws next

_____ **JUSTICE SLATE:**

Robert Hall (President) ← Hall draws last
David Long (1st VP)
Beverly Johnson (2nd VP)
Kathy Gray (3rd VP)
Tony Bond (4th VP)
Eden Park (Secretary)
Kay Clay (Treasurer)
Ronald Short (Delegate)
Juan Rivers (Delegate)

_____ **TREASURER:**

Donald Duke

ELECTION COMMITTEE

[Note: See page 25 for the sample ballot for this drawing's outcome.]

N-16

DRAWING FOR POSITION ON BALLOT *(without slates)*

_____ (Local) (Unit)

Date _____

The following shows the order in which to draw (by position, then alphabetically by last name):

PRESIDENT:

_____ Betty Brown ← Brown draws first
_____ Robert Hall ← Hall draws next

EXECUTIVE VICE PRESIDENT:

_____ Ed Daley ← Daley draws after Hall & so forth (*alpha order*)
_____ Tom Farmer
_____ Bruce Fox
_____ Douglas Knight

FIRST VICE PRESIDENT:

_____ David Long
_____ Peter Peck

SECOND VICE PRESIDENT:

Bill Beck (unopposed/elected)

THIRD VICE PRESIDENT:

_____ Sue Bee
_____ Kathy Gray

SECRETARY:

Peg Notes (unopposed/elected)

TREASURER:

Roger Money (unopposed/elected)

SAMPLE

ELECTION COMMITTEE

[Note: See page 23 for the sample ballot for this drawing's outcome.]

N-17

1. SEND RESULTS TO CANDIDATES (BY MAIL)
2. DISSEMINATE RESULTS TO MEMBERSHIP (POSTED ON BULLETIN BOARDS, ETC.)

NOTICE TO CSEA MEMBERS POSITION ON BALLOT

_____ (LOCAL) (UNIT)

Listed below are the results of the drawing for positions that was conducted by the Election Committee on _____ that indicate the names of the candidates and the order they will appear on the ballot.

Position Candidate Names/Slate Names

- 3** **LIBERTY SLATE:**
Betty Brown (President)
Peter Peck (1st VP)
George Green (2nd VP)
Sue Bee (3rd VP)
Martin Jones (4th VP)
Jackie Jetson (Secretary)
Ann Card (Treasurer)
Forest Tree (Delegate)
Ruth Booth (Delegate)
- 2** **PRESIDENT:**
Pearl Button
- 1** **JUSTICE SLATE:**
Robert Hall (President)
David Long (1st VP)
Beverly Johnson (2nd VP)
Kathy Gray (3rd VP)
Tony Bond (4th VP)
Eden Park (Secretary)
Kay Clay (Treasurer)
Ronald Short (Delegate)
Juan Rivers (Delegate)
- 2** **TREASURER:**
Donald Duke

SAMPLE

_____, Chairperson
Election Committee

(Date)

ELECTION
COMMITTEE
FORMS

*TO BE USED IN ALL TYPES OF
ELECTIONS*

C-2

CSEA, Inc.
Local 1000, AFSCME, AFL-CIO
143 Washington Avenue, Albany, New York 12210

Fill this form out completely and return it to your Local or Unit Election Chairperson:

(Chairperson contact information)

NOTIFICATION OF INTENT TO OBSERVE

This is to advise the Committee that _____, candidate for
(Candidate's name)

_____, intends to observe the CSEA election process on _____.
(position sought) (date)

The observation will be done (check one):

by the candidate personally 10-Digit CSEA ID No.: _____

- or -

by the observer named below (fill out below):

Name of Observer (if not candidate): _____

10-Digit CSEA ID No.: _____

Local # _____ Region # _____ Unit: _____

Telephone: Work: _____ Home: _____ Cell: _____

**The candidate signs his/her name hereby authorizing the above person to act as the candidate's observer.*

Signature of Candidate

Date

If you have any questions about this form, please contact your Local or Unit Election Chairperson listed above.
Revised – October 2018

C-3



Local 1000 AFSCME, AFL-CIO

OFFICIAL BALLOT

(NAME)

LOCAL ELECTION

* SEE INSTRUCTIONS ON BACK *

C-4

[TO BE DISTRIBUTED TO CANDIDATE APPLICANTS]

So You're Considering Running for Office, Now What?

Running for an elected officer position in your Union Local or Unit is a great way to be more involved and step up on behalf of your co-workers. When making the decision to run for office, there is important information you should know before you take the "plunge". Here are a few commonly asked questions:

Q: What are the Local/Unit Officer's duties?

A: Many of the duties for each officer position are outlined in the CSEA Local or Unit Constitution. You can request a copy via e-mail at sec@cseainc.org, or contact the "election hotline" 1-800-342-4146, ext. 1447.

Depending on the position, as an officer there are meetings (executive board, committees, labor/management, etc.), trainings (officer and representation) and events (annual delegates convention/Region conferences) you are expected to participate in. Some positions are also responsible for completing various forms, creating and distributing correspondence, officer reports, creating and submitting a budget, filing a tax form, recording (written/electronic) and distributing minutes, etc.

Q: Are there pre-requirements to run for office?

A: In order to seek office, a candidate must be: at least 18 years of age, a member in good standing of the Local/Unit (as applicable) since June 1 of last year, shall not have been a member of a competing labor association or union since June 1 of last year, shall not currently be serving a disciplinary penalty imposed by the Judicial Board of CSEA, and must not have been the subject of a bonding claim by the Association or disqualified from being covered by the Association's surety bond.

It is recommended you learn about CSEA history and the basics of the labor movement, understand the structure of CSEA, become familiar with your contract, and take advantage of virtual labor education classes offered by the CSEA Education and Training Department.

Q: How much time is involved in being an officer?

A: Being an officer requires a commitment of not just your energy, make sure your personal life can handle you taking on this responsibility, you will be using a significant amount of your own personal time.

Q: Is an officer position a paid position?

A: Most officer positions are volunteer jobs, although some may come with a small honorarium. Being a union officer is not about the money. A union officer is a part of something bigger than yourself. You are a part of a team. It's not about "I," it's about "we".

Understand when you make the decision to be a union officer you are deciding to take on a leadership role to serve and represent the members and build the union.

Thank you for considering running for office!

MAIL BALLOT
ELECTION
FORMS

*TO BE USED IN
MAIL BALLOT ELECTIONS*

SAMPLE
without Slates

MB-1



OFFICIAL BALLOT

_____ (LOCAL) (UNIT) **ELECTION**

PRESIDENT (vote for one)	EXECUTIVE VICE PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT	3rd VICE PRESIDENT (vote for one)	SECRETARY	TREASURER
<input type="checkbox"/> Robert Hall	<input type="checkbox"/> Bruce Fox	<input type="checkbox"/> Peter Peck	Bill Beck <i>(Unopposed/Elected)</i>	<input type="checkbox"/> Sue Bee	Peg Notes <i>(Unopposed/Elected)</i>	Roger Money <i>(Unopposed/Elected)</i>
<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Ed Daley	<input type="checkbox"/> David Long		<input type="checkbox"/> Kathy Gray		
	<input type="checkbox"/> Tom Farmer					
	<input type="checkbox"/> Douglas Knight					

*** SEE INSTRUCTIONS ON BACK ***

MB-1

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

- Read the ballot carefully before marking.
- Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
- Vote for one candidate only for each office (except otherwise indicated).
- No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
- Write-in candidates are prohibited.
- Any other markings may render the ballot invalid.
- Do not put any other marks on your official ballot. Do not sign or initial the ballot.
- After you finish marking the ballot, place your ballot into the secret ballot envelope and seal it. Do not write or make any mark on the secret ballot envelope. Do not place anything other than the ballot in the secret ballot envelope.
- Place the secret ballot envelope inside the return envelope.
- On the outside of the return envelope print your name, return address and 10-digit CSEA ID #. This is used to validate your eligibility to vote. (Ballots containing insufficient information to be verified will not be valid).
- Ballots must be received at the address of the Election Committee shown on the return envelope no later than _____, 20__ by _____ [AM/PM].

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

**SAMPLE
with Slates**



OFFICIAL BALLOT

_____ (LOCAL) (UNIT) **ELECTION**

	PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT (vote for one)	3rd VICE PRESIDENT (vote for one)	4th VICE PRESIDENT (vote for one)	SECRETARY (vote for one)	TREASURER (vote for one)	DELEGATE (vote for TWO)
JUSTICE SLATE <input type="checkbox"/>	<input type="checkbox"/> Robert Hall	<input type="checkbox"/> David Long	<input type="checkbox"/> Beverly Johnson	<input type="checkbox"/> Kathy Gray	<input type="checkbox"/> Tony Bond	<input type="checkbox"/> Eden Park	<input type="checkbox"/> Kay Clay	<input type="checkbox"/> Ronald Short <input type="checkbox"/> Juan Rivers
	<input type="checkbox"/> Pearl Button						<input type="checkbox"/> Donald Duke	
LIBERTY SLATE <input type="checkbox"/>	<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Peter Peck	<input type="checkbox"/> George Green	<input type="checkbox"/> Sue Bee	<input type="checkbox"/> Martin Jones	<input type="checkbox"/> Jackie Jetson	<input type="checkbox"/> Ann Card	<input type="checkbox"/> Forest Tree <input type="checkbox"/> Ruth Booth

*** SEE INSTRUCTIONS ON BACK ***

MB-2

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

- Read the ballot carefully before marking.
- Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
- Vote for one candidate only for each office (except otherwise indicated).
- Where there are one or more slates, you may vote for the entire slate by simply marking the slate designation box near the slate name. Such a mark will count as a vote for each individual on the slate. You may vote for individuals on any slate by marking the boxes near the names of the individual candidates you wish to vote for and not marking the slate designation box.
- If both the slate designation box and boxes of opposing candidates for the same position are marked, it will be recorded as an overvote for the affected position(s).
- No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
- Write-in candidates are prohibited.
- Any other markings may render the ballot invalid.
- Do not put any other marks on your official ballot. Do not sign or initial the ballot.
- After you finish marking the ballot, place your ballot into the secret ballot envelope and seal it. Do not write or make any mark on the secret ballot envelope. Do not place anything other than the ballot in the secret ballot envelope.
- Place the secret ballot envelope inside the return envelope.
- On the outside of the return envelope print your name, return address and 10-digit CSEA ID #. This is used to validate your eligibility to vote. (Ballots containing insufficient information to be verified will not be valid).
- Ballots must be received at the address of the Election Committee shown on the return envelope no later than _____, 20__ by _____ [AM/PM].

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

MB-3

ELECTION COMMITTEE

_____(ADDRESS)_____

POSTAGE

(LABEL)

Member
Address

TIME SENSITIVE

ELECTION MATERIAL ENCLOSED

SECRET BALLOT

Name

Address

10-digit CSEA ID #

POSTAGE
PAID

ELECTION COMMITTEE

PO BOX _____

S A M P L E

MB-4



R E P L A C E M E N T B A L L O T

_____ (LOCAL) (UNIT) **ELECTION**

	PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT (vote for one)	3rd VICE PRESIDENT (vote for one)	4th VICE PRESIDENT (vote for one)	SECRETARY (vote for one)	TREASURER (vote for one)	DELEGATE (vote for TWO)
JUSTICE SLATE <input type="checkbox"/>	<input type="checkbox"/> Robert Hall	<input type="checkbox"/> David Long	<input type="checkbox"/> Beverly Johnson	<input type="checkbox"/> Kathy Gray	<input type="checkbox"/> Tony Bond	<input type="checkbox"/> Eden Park	<input type="checkbox"/> Kay Clay	<input type="checkbox"/> Ronald Short <input type="checkbox"/> Juan Rivers
	<input type="checkbox"/> Pearl Button						<input type="checkbox"/> Donald Duke	
LIBERTY SLATE <input type="checkbox"/>	<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Peter Peck	<input type="checkbox"/> George Green	<input type="checkbox"/> Sue Bee	<input type="checkbox"/> Martin Jones	<input type="checkbox"/> Jackie Jetson	<input type="checkbox"/> Ann Card	<input type="checkbox"/> Forest Tree <input type="checkbox"/> Ruth Booth

*** SEE INSTRUCTIONS ON BACK ***

MB-4

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

- Read the ballot carefully before marking.
- Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
- Vote for one candidate only for each office (except otherwise indicated).
- Where there are one or more slates, you may vote for the entire slate by simply marking the slate designation box near the slate name. Such a mark will count as a vote for each individual on the slate. You may vote for individuals on any slate by marking the boxes near the names of the individual candidates you wish to vote for and not marking the slate designation box.
- If both the slate designation box and boxes of opposing candidates for the same position are marked, it will be recorded as an overvote for the affected position(s).
- No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
- Write-in candidates are prohibited.
- Any other markings may render the ballot invalid.
- Do not put any other marks on your official ballot. Do not sign or initial the ballot.
- After you finish marking the ballot, place your ballot into the secret ballot envelope and seal it. Do not write or make any mark on the secret ballot envelope. Do not place anything other than the ballot in the secret ballot envelope.
- Place the secret ballot envelope inside the return envelope.
- On the outside of the return envelope print your name, return address and 10-digit CSEA ID #. This is used to validate your eligibility to vote. (Ballots containing insufficient information to be verified will not be valid).
- Ballots must be received at the address of the Election Committee shown on the return envelope no later than _____, 20__ by _____ [AM/PM].

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

MB-5

ELECTION COMMITTEE
_____(ADDRESS)_____

POSTAGE

(LABEL) Member Address

****TIME SENSITIVE****
ELECTION MATERIAL ENCLOSED

SECRET BALLOT

Name _____

Address _____

10-digit CSEA ID #

POSTAGE PAID

ELECTION COMMITTEE
PO BOX _____

REPLACEMENT BALLOT

MB-6

FOR PUBLIC SECTOR LOCALS/UNITS, MAIL/EMAIL/POST AT LEAST 5 DAYS BEFORE ELECTION. FOR PRIVATE SECTOR LOCALS, MAIL AT LEAST 15 DAYS BEFORE ELECTION.

NOTICE TO CSEA MEMBERS ELECTION OF OFFICERS

_____ (LOCAL) (UNIT)

Positions to be elected are listed below:

BALLOTS WILL BE MAILED TO ALL ELIGIBLE MEMBERS ON _____.

(Date)

Deadline for receipt of completed ballots is _____, _____ at the address

(Time)

(Date)

on the return envelope: _____.

(Election Committee's Address on Return Envelope)

The counting of ballots will begin on _____

(Date and time)

at _____.

(Location)

Candidates are permitted to attend as observers, at their own expense, each phase of the election process. Candidates may designate, in writing, persons, who must be members in good standing, to serve as their observers (also at their own expense). * FACE COVERINGS AND SOCIAL DISTANCING ARE REQUIRED.*

TO BE ELIGIBLE TO VOTE, A MEMBER MUST BE A MEMBER IN GOOD STANDING AS OF APRIL 1ST.

If your original ballot is not received or if any item is missing from the envelope, starting on _____, 20__, you may request a replacement ballot or the missing item from:

Name _____

Address _____

Phone _____

Email _____

MB-7

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME, AFL-CIO

REQUEST FOR REPLACEMENT BALLOT

PLEASE PRINT CLEARLY.

Date of Request _____

Time of Request _____

NAME: _____

10-DIGIT CSEA ID NUMBER: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

My original ballot was: () Not received in the mail
 () Spoiled or mutilated
 () Lost or misplaced
 () Other/explain:

Replacement mailed on: _____

Replacement mailed by: _____

MB-8

REPLACEMENT BALLOT LOG

<u>Date of Request</u>	<u>Name and 10-digit CSEA ID #</u>	<u>Address</u>	<u>Reason</u>	<u>Date Mailed</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____
11.	_____	_____	_____	_____
12.	_____	_____	_____	_____
13.	_____	_____	_____	_____
14.	_____	_____	_____	_____
15.	_____	_____	_____	_____
16.	_____	_____	_____	_____
17.	_____	_____	_____	_____
18.	_____	_____	_____	_____
19.	_____	_____	_____	_____
20.	_____	_____	_____	_____

MB-9

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME/AFL-CIO

SIGN-IN SHEET FOR OBSERVERS BALLOT COUNT

_____ (LOCAL) (UNIT)

Date _____

Location _____

PLEASE PRINT CLEARLY.

	<u>Name</u>	<u>10-digit CSEA ID #</u>	<u>Candidate or Proxy for Candidate</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____

MB-10

TIE BREAKER CONSENT

_____ (LOCAL) (UNIT)

We, the undersigned, having been fully advised of our rights as candidates to have a run-off election held to break the tie in the _____ election, hereby waive said right and consent to a coin toss to break the tie.

Signature of candidate

Date

Signature of candidate

Date

MB-11

MAIL BALLOT ELECTION REPORT

_____ [LOCAL/UNIT NAME]

Date: _____

A. NUMBER OF ENVELOPES MAILED AND RECEIVED

1. NUMBER OF ENVELOPES MAILED: _____
2. NUMBER OF REPLACEMENTS MAILED: _____
3. NUMBER OF ENVELOPES RECEIVED BY
DEADLINE: _____

B. NUMBER OF INVALID RETURNS BY CATEGORY

1. MISSING CSEA ID #: _____
2. NON-ELECTION RELATED MAIL: _____
3. TOTAL INVALID RETURNS NOT PROCESSED
TO VERIFICATION (B1 + B2): _____

C. NUMBER OF INELIGIBLE ENVELOPES

1. RETURNS PROCESSED (A3 minus B3): _____
2. ENVELOPES NOT PASSING VERIFICATION
(Ineligible voters): _____
3. DUPLICATES: _____
4. TOTAL NUMBER OF INELIGIBLES
(not processed further [C2 + C3]): _____

D. NUMBER OF ENVELOPES WITHOUT BALLOT CAST

1. RETURNS VERIFIED (C1 minus C4): _____
2. EMPTY OUTER ENVELOPE: _____
3. EMPTY SECRET BALLOT ENVELOPE: _____
4. NUMBER OF ENVELOPES MISSING BALLOTS
(D2 + D3): _____

MB-11

5. TOTAL NUMBER OF BALLOTS PROCESSED
(D1 minus D4):..... _____

E. NUMBER OF INVALID BALLOTS BY CATEGORY

1. NUMBER OF BALLOTS CONTAINING A
VOTER IDENTIFYING MARK (i.e., initials,
name, etc.): _____

2. OVERVOTE VOIDING ENTIRE BALLOT: _____

3. UNDERVOTE OF NO VOTE CAST:..... _____

4. TOTAL NUMBER OF INVALID BALLOTS
(E1 + E2 + E3): _____

5. TOTAL NUMBER OF BALLOTS COUNTED
(D5 minus E4): _____

F. RECONCILIATION

1. TOTAL NUMBER OF ENVELOPES AND BALLOTS
REJECTED/INVALID (B3 + C4 + D4 + E4): _____

2. NUMBER OF VALID BALLOTS COUNTED
(A3 minus F1) or (D5 minus E4) : _____

G. TOTAL VOTES BY CANDIDATE

*(List each & every candidate by position with # votes received. Note the winner(s) with * asterisk. Note those who were "elected-unopposed.")*

Candidate Name
(Example: Robert Hall)

Position
(Example: President)

Number of Votes
(Example: 19 votes)

**Asterisk indicates successful candidate.*

MB-11

Certified by the Election Committee on _____, 20__.

[Committee signatures]

MB-12

1. SEND NOTICE OF RESULTS TO CANDIDATES BY MAIL.
2. DISSEMINATE NOTICE OF RESULTS TO MEMBERSHIP (*MAIL/EMAIL/POST ON BULLETIN BOARDS, ETC.*)

NOTICE TO CANDIDATES & MEMBERSHIP OF ELECTION RESULTS

Listed below are the results of the mail ballot election conducted by the _____ Election Committee on _____ at _____ (Date)
_____.
(Location)

<u>Candidate Names</u>	<u>Office</u>	<u>Number of Votes Received</u>
------------------------	---------------	---------------------------------

(Signature of Election Chairperson)

Any member believing himself/herself aggrieved by any aspect of the election process may file a written protest postmarked or electronically filed within ten (10) calendar days after the member knew or should have known of the act or omission regarding which they are complaining. The written protest must be sent to the appropriate supervising Election Committee as set forth below. The Supervising Election Committee will send all other candidates affected by the protest a copy of the protest and give adequate time for responses. Protests are not anonymous. The burden of proof is on Protester(s).

ELECTION

SUPERVISING ELECTION COMMITTEE

Local: Statewide Election Committee and simultaneously with the Local Election Committee. Contact the Statewide Election Committee for more information at 1-800-342-4146, ext. 1447.

Unit: Local Election Committee and simultaneously with the Unit Election Committee. Contact your Local Election Committee for more information.

BALLOT BOX
ELECTION
FORMS

*TO BE USED IN
BALLOT BOX ELECTIONS*

SAMPLE
without Slates

BB-1



OFFICIAL BALLOT

_____ (LOCAL) (UNIT) **ELECTION**

PRESIDENT (vote for one)	EXECUTIVE VICE PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT	3rd VICE PRESIDENT (vote for one)	SECRETARY	TREASURER
<input type="checkbox"/> Robert Hall	<input type="checkbox"/> Bruce Fox	<input type="checkbox"/> Peter Peck	Bill Beck <i>(Unopposed/Elected)</i>	<input type="checkbox"/> Sue Bee	Peg Notes <i>(Unopposed/Elected)</i>	Roger Money <i>(Unopposed/Elected)</i>
<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Ed Daley	<input type="checkbox"/> David Long		<input type="checkbox"/> Kathy Gray		
	<input type="checkbox"/> Tom Farmer					
	<input type="checkbox"/> Douglas Knight					

*** SEE INSTRUCTIONS ON BACK ***

BB-1

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

- Read the ballot carefully before marking.
- Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
- Vote for one candidate only for each office (except indicated otherwise).
- No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
- Write-in candidates are prohibited.
- Any other markings may render the ballot invalid.
- Do not put any other marks on your official ballot.
- Do not sign or initial the ballot.
- Insert the ballot into the ballot box.

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

**SAMPLE
with Slates**



OFFICIAL BALLOT

_____ (LOCAL) (UNIT) **ELECTION**

	PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT (vote for one)	3rd VICE PRESIDENT (vote for one)	4th VICE PRESIDENT (vote for one)	SECRETARY (vote for one)	TREASURER (vote for one)	DELEGATE (vote for TWO)
JUSTICE SLATE <input type="checkbox"/>	<input type="checkbox"/> Robert Hall	<input type="checkbox"/> David Long	<input type="checkbox"/> Beverly Johnson	<input type="checkbox"/> Kathy Gray	<input type="checkbox"/> Tony Bond	<input type="checkbox"/> Eden Park	<input type="checkbox"/> Kay Clay	<input type="checkbox"/> Ronald Short <input type="checkbox"/> Juan Rivers
	<input type="checkbox"/> Pearl Button						<input type="checkbox"/> Donald Duke	
LIBERTY SLATE <input type="checkbox"/>	<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Peter Peck	<input type="checkbox"/> George Green	<input type="checkbox"/> Sue Bee	<input type="checkbox"/> Martin Jones	<input type="checkbox"/> Jackie Jetson	<input type="checkbox"/> Ann Card	<input type="checkbox"/> Forest Tree <input type="checkbox"/> Ruth Booth

*** SEE INSTRUCTIONS ON BACK ***

BB-2

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

- Read the ballot carefully before marking.
- Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
- Vote for one candidate only for each office (except indicated otherwise).
- Where there are one or more slates, you may vote for the entire slate by simply marking the slate designation box near the slate name. Such a mark will count as a vote for each individual on the slate. You may vote for individuals on any slate by marking the boxes near the names of the individual candidates you wish to vote for and not marking the slate designation box.
- If both the slate designation box and boxes of opposing candidates for the same position are marked, it will be recorded as an overvote for the affected position(s).
- No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
- Write-in candidates are prohibited.
- Any other markings may render the ballot invalid.
- Do not put any other marks on your official ballot.
- Do not sign or initial the ballot.
- Insert the ballot into the ballot box.

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

S A M P L E



A B S E N T E E B A L L O T

_____ (LOCAL) (UNIT) **ELECTION**

PRESIDENT (vote for one)	EXECUTIVE VICE PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT	3rd VICE PRESIDENT (vote for one)	SECRETARY	TREASURER
<input type="checkbox"/> Robert Hall	<input type="checkbox"/> Bruce Fox	<input type="checkbox"/> Peter Peck	Bill Beck <i>(Unopposed/Elected)</i>	<input type="checkbox"/> Sue Bee	Peg Notes <i>(Unopposed/Elected)</i>	Roger Money <i>(Unopposed/Elected)</i>
<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Ed Daley	<input type="checkbox"/> David Long		<input type="checkbox"/> Kathy Gray		
	<input type="checkbox"/> Tom Farmer					
	<input type="checkbox"/> Douglas Knight					

*** SEE INSTRUCTIONS ON BACK ***

BB-3

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

- Read the ballot carefully before marking.
- Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
- Vote for one candidate only for each office (except indicated otherwise).
- Where there are one or more slates, you may vote for the entire slate by simply marking the slate designation box near the slate name. Such a mark will count as a vote for each individual on the slate. You may vote for individuals on any slate by marking the boxes near the names of the individual candidates you wish to vote for and not marking the slate designation box.
- If both the slate designation box and boxes of opposing candidates for the same position are marked, it will be recorded as an overvote for the affected position(s).
- No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
- Write-in candidates are prohibited.
- Any other markings may render the ballot invalid.
- Do not put any other marks on your official ballot. Do not sign or initial the ballot.
- After you finish marking the ballot, place your ballot into the secret ballot envelope and seal it. Do not write or make any mark on the secret ballot envelope. Do not place anything other than the ballot in the secret ballot envelope.
- Place the secret ballot envelope inside the return envelope.
- On the outside of the return envelope print your name, return address and 10-digit CSEA ID #. This is used to validate your eligibility to vote. (Ballots containing insufficient information to be verified will not be valid).
- Ballots must be received at the address of the Election Committee shown on the return envelope no later than _____, 20__ at _____[AM/PM].

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

BB-4

ELECTION COMMITTEE
_____(ADDRESS)_____

POSTAGE

(LABEL) Member Address

****TIME SENSITIVE****
ELECTION MATERIAL ENCLOSED

SECRET BALLOT

Name _____

Address _____

10-digit CSEA ID # _____

POSTAGE PAID

ELECTION COMMITTEE
PO BOX _____

ABSENTEE BALLOT

BB-5

FOR PUBLIC SECTOR LOCALS/UNITS, MAIL/EMAIL/POST AT LEAST 5 DAYS BEFORE ELECTION. FOR PRIVATE SECTOR LOCALS, MAIL AT LEAST 15 DAYS BEFORE ELECTION.

NOTICE TO CSEA MEMBERS **BALLOT BOX ELECTION OF OFFICERS**

_____ (LOCAL) (UNIT)

Positions to be elected are listed below:

ON _____, BALLOT BOX(ES) WILL BE LOCATED AT _____.
(Date) (Location[s])

The polling places will open at _____ and will close at _____.
(Time) (Time)

If you are unable to vote in person, an absentee ballot may be obtained by contacting:

NAME:

ADDRESS:

PHONE #:

EMAIL:

Deadline for receipt of completed absentee ballots is _____, _____ at
(Time) (Date)
the address on the return envelope: _____.
(Election Committee's Address on Return Envelope)

The counting of ballots will begin on _____
(Date and time)

at _____
(Location)

** FACE COVERINGS AND SOCIAL DISTANCING ARE REQUIRED. **

Candidates are permitted to attend as observers, at their own expense, each phase of the election process. Candidates may designate, in writing, persons, who must be members in good standing, to serve as their observers (also at their own expense).

TO BE ELIGIBLE TO VOTE, A MEMBER MUST BE A MEMBER IN GOOD STANDING AS OF APRIL 1ST.

BB-6

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME, AFL-CIO

REQUEST FOR ABSENTEE BALLOT

* PLEASE PRINT CLEARLY. *

Date of Request _____

Time of Request _____

NAME: _____

10-DIGIT CSEA ID NUMBER: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

I cannot vote in person on Election Day because:

- COVID-19 pandemic**
- On vacation
- In the hospital
- Pass day
- Other/explain: _____

Signature

Date

BB-7

ABSENTEE BALLOT LOG

<u>Date</u>	<u>Name & 10-digit CSEA ID#</u>	<u>Reason</u>	<u>1) Date Mailed or 2) Ineligible</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____
18.	_____	_____	_____
19.	_____	_____	_____
20.	_____	_____	_____

S A M P L E

BB-8



C H A L L E N G E D B A L L O T

_____ (LOCAL) (UNIT) **ELECTION**

PRESIDENT (vote for one)	EXECUTIVE VICE PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT	3rd VICE PRESIDENT (vote for one)	SECRETARY	TREASURER
<input type="checkbox"/> Robert Hall	<input type="checkbox"/> Bruce Fox	<input type="checkbox"/> Peter Peck	Bill Beck <i>(Unopposed/Elected)</i>	<input type="checkbox"/> Sue Bee	Peg Notes <i>(Unopposed/Elected)</i>	Roger Money <i>(Unopposed/Elected)</i>
<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Ed Daley	<input type="checkbox"/> David Long		<input type="checkbox"/> Kathy Gray		
	<input type="checkbox"/> Tom Farmer					
	<input type="checkbox"/> Douglas Knight					

*** SEE INSTRUCTIONS ON BACK ***

BB-8

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

1. Read the ballot carefully before marking.
2. Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
3. Vote for one candidate only for each office (except indicated otherwise).
4. Where there are one or more slates, you may vote for the entire slate by simply marking the slate designation box near the slate name. Such a mark will count as a vote for each individual on the slate. You may vote for individuals on any slate by marking the boxes near the names of the individual candidates you wish to vote for and not marking the slate designation box.
5. If both the slate designation box and boxes of opposing candidates for the same position are marked, it will be recorded as an overvote for the affected position(s).
6. No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
7. Write-in candidates are prohibited.
8. Any other markings may render the ballot invalid.
9. Do not put any other marks on your official ballot.
10. Do not sign or initial the ballot.
11. After you finish marking the ballot, place your ballot into the SECRET BALLOT ENVELOPE and seal it. Do not write or make any mark on the secret ballot envelope. Do not place anything other than the ballot in the secret ballot envelope.
12. Place the SECRET BALLOT ENVELOPE inside the outer envelope. Fill-out your name, address and 10-digit CSEA ID #. This is used to validate your eligibility to vote. Seal the outer envelope and return it to the committee-designated person.

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

Name	_____
Address	_____

	<input type="text"/>
10-digit CSEA ID #	

CHALLENGED BALLOT

SECRET BALLOT

BB-10

Each eligible voter must sign the Voter Registration Log before receiving a ballot.

VOTER REGISTRATION LOG

_____ (LOCAL) (UNIT)

Date: _____

Location: _____

* PLEASE PRINT *

Name

10-digit CSEA ID #

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____

BB-11

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME/AFL-CIO

SIGN-IN SHEET FOR OBSERVERS BALLOT COUNT

_____ (LOCAL) (UNIT)

Date _____

Location _____

PLEASE PRINT CLEARLY.

	<u>Name</u>	<u>10-digit CSEA ID #</u>	<u>Candidate or Proxy for Candidate</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____

BB-12

TIE BREAKER CONSENT

_____ (LOCAL) (UNIT)

We, the undersigned, having been fully advised of our rights as candidates to have a run-off election held to break the tie in the _____ election, hereby waive said right and consent to a coin toss to break the tie.

Signature of candidate

Date

Signature of candidate

Date

BB-13

BALLOT BOX ELECTION REPORT

_____ [LOCAL/UNIT NAME]

Date _____

A. ABSENTEE BALLOTS:

- (1) NUMBER OF ENVELOPES ISSUED (if none, put "0"): _____
- (2) NUMBER OF UNDELIVERABLE ENVELOPES RETURNED: _____
- (3) NUMBER OF ENVELOPES RECEIVED BY
_____ a.m./p.m., _____, DEADLINE: _____
- (4) TOTAL ABSENTEE BALLOT ENVELOPES NOT
PROCESSED FURTHER (i.e., no secret ballot envelope,
duplicate, missing or incorrect info on outer envelope): _____
- (5) TOTAL VERIFIED ABSENTEE BALLOT ENVELOPES
(A3 - A4): _____
- (6) TOTAL ABSENTEE SECRET BALLOT ENVELOPES
NOT PROCESSED FURTHER (i.e., secret ballot envelopes
missing ballots or containing multiple ballots): _____

B. ABSENTEE BALLOTS PROCESSED (A5 - A6): _____

NUMBER OF INVALID ABSENTEE BALLOTS BY CATEGORY:

- (1) NUMBER OF BALLOTS CONTAINING A VOTER
IDENTIFYING MARK (i.e., initials, name, etc.): _____
- (1) NUMBER OF BALLOTS ENTIRELY VOID FOR
CONTAINING MORE THAN ONE VOTE IN EVERY
RACE (Over votes): _____
- (3) NUMBER OF BALLOTS CONTAINING NO VOTES
(Under votes): _____

BB-13

Absentee Ballots (continued)

(4) NUMBER OF INVALID ABSENTEE BALLOTS
(B1 + B2 + B3): _____

(5) NUMBER OF VALID ABSENTEE BALLOTS (B - B4): _____

C. OFFICIAL BALLOTS:

(1) TOTAL NUMBER OF BALLOTS REMOVED
FROM BALLOT BOX: _____

INVALID BALLOTS BY CATEGORY:

(2) NUMBER OF BALLOTS CONTAINING A VOTER
IDENTIFYING MARK (i.e., initials, name, etc.): _____

(3) NUMBER OF BALLOTS ENTIRELY VOID FOR
CONTAINING MORE THAN ONE VOTE IN EVERY
RACE (Over votes): _____

(4) NUMBER OF BALLOTS CONTAINING NO VOTES
(Under votes): _____

(5) TOTAL NUMBER OF INVALID BALLOTS
(C2 + C3 + C4): _____

(6) TOTAL NUMBER OF VALID OFFICIAL BALLOTS
(C1 - C5): _____

D. CHALLENGED BALLOTS:

(1) NUMBER OF CHALLENGED BALLOTS DISTRIBUTED: _____

(2) NUMBER OF BALLOTS VERIFIED (If not needed, put "0"):

(3) NUMBER OF INVALID CHALLENGED BALLOTS: _____

(4) NUMBER OF VALID CHALLENGED BALLOTS: _____

E. TOTAL NUMBER OF ENVELOPES AND BALLOTS
REJECTED/INVALID (A4 + A6 + B4 + C5 + D3): _____

BB-13

Totals (continued)

**F. TOTAL NUMBER OF VALID BALLOTS
COUNTED (B5 + C6 + D4):** _____

G. TOTAL VOTES BY CANDIDATE: *(List each & every candidate by position with # votes received. Note the winner(s) with * asterisk. Note those who were "elected-unopposed.")*

Candidate Name
(Example: Robert Hall)

Position
(Example: President)

Number of Votes
(Example: 19 votes)

**Asterisk indicates successful candidate.*

Certified by the Election Committee on _____, 20__.

[Committee signatures]

BB-14

1. *SEND NOTICE OF RESULTS TO CANDIDATES BY MAIL.*
2. *DISSEMINATE NOTICE OF RESULTS TO MEMBERSHIP (MAIL/EMAIL/POST ON BULLETIN BOARDS, ETC.)*

NOTICE TO CANDIDATES & MEMBERSHIP OF ELECTION RESULTS

Listed below are the results of the ballot box election conducted by the Election Committee

on _____ at _____.
(Date) (Location)

<u>Candidate Names</u>	<u>Position</u>	<u>Number of Votes Received</u>
------------------------	-----------------	---------------------------------

(Signature of Election Chairperson)

Any member believing himself/herself aggrieved by any aspect of the election process may file a written protest postmarked or electronically filed within ten (10) calendar days after the member knew or should have known of the act or omission regarding which they are complaining. The written protest must be sent to the appropriate supervising Election Committee as set forth below. The Supervising Election Committee will send all other candidates affected by the protest a copy of the protest and give adequate time for responses. Protests are not anonymous. The burden of proof is on Protester(s).

ELECTION

SUPERVISING ELECTION COMMITTEE

Local:

Statewide Election Committee and simultaneously with the Local Election Committee. Contact the Statewide Election Committee for more information at 1-800-342-4146, ext. 1447.

Unit:

Local Election Committee and simultaneously with the Unit Election Committee. Contact your Local Election Committee for more information.

VOTING MACHINE
ELECTION
FORMS

*TO BE USED IN
VOTING MACHINE ELECTIONS*

S A M P L E



A B S E N T E E B A L L O T

_____ (LOCAL) (UNIT) **ELECTION**

PRESIDENT (vote for one)	EXECUTIVE VICE PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT	3rd VICE PRESIDENT (vote for one)	SECRETARY	TREASURER
<input type="checkbox"/> Robert Hall	<input type="checkbox"/> Bruce Fox	<input type="checkbox"/> Peter Peck	Bill Beck <i>(Unopposed/Elected)</i>	<input type="checkbox"/> Sue Bee	Peg Notes <i>(Unopposed/Elected)</i>	Roger Money <i>(Unopposed/Elected)</i>
<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Ed Daley	<input type="checkbox"/> David Long		<input type="checkbox"/> Kathy Gray		
	<input type="checkbox"/> Tom Farmer					
	<input type="checkbox"/> Douglas Knight					

*** SEE INSTRUCTIONS ON BACK ***

VM-1

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

- Read the ballot carefully before marking.
- Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
- Vote for one candidate only for each office (except indicated otherwise).
- Where there are one or more slates, you may vote for the entire slate by simply marking the slate designation box near the slate name. Such a mark will count as a vote for each individual on the slate. You may vote for individuals on any slate by marking the boxes near the names of the individual candidates you wish to vote for and not marking the slate designation box.
- If both the slate designation box and boxes of opposing candidates for the same position are marked, it will be recorded as an overvote for the affected position(s).
- No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
- Write-in candidates are prohibited.
- Any other markings may render the ballot invalid.
- Do not put any other marks on your official ballot. Do not sign or initial the ballot.
- After you finish marking the ballot, place your ballot into the secret ballot envelope and seal it. Do not write or make any mark on the secret ballot envelope. Do not place anything other than the ballot in the secret ballot envelope.
- Place the secret ballot envelope inside the return envelope.
- On the outside of the return envelope print your name, return address and 10-digit CSEA ID #. This is used to validate your eligibility to vote. (Ballots containing insufficient information to be verified will not be valid).
- Ballots must be received at the address of the Election Committee shown on the return envelope no later than _____, 20__ at _____[AM/PM].

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

VM-2

ELECTION COMMITTEE
_____(ADDRESS)_____

POSTAGE

(LABEL) Member Address

TIME SENSITIVE
ELECTION MATERIAL ENCLOSED

SECRET BALLOT

Name _____
Address _____

10-digit CSEA ID # _____

POSTAGE PAID

ELECTION COMMITTEE
PO BOX _____

ABSENTEE BALLOT

SAMPLE BALLOT

★ ELECTION OF OFFICERS ★



(Local) (Unit), CSEA

Date: _____

Polls Open: _____ a.m. to _____ p.m.





















Location: _____

Directions for Voting on the Voting Machine

- Swing the RED HANDLE (overhead) to the Right as far as it will go, and LEAVE IT THERE.
- Turn down the pointers over the names you wish to vote for, from this position  to this position  Name of CANDIDATE and LEAVE THEM DOWN.
- Swing the RED HANDLE back to the left and LEAVE IT THERE.

NAMES ON VOTING MACHINE AND ON ABSENTEE BALLOT ARE ARRANGED THE SAME.

VM-3

ROW									
A	 1A	 2A	 3A	 4A	 5A	 6A	 7A	 8A	 9A
B	 1B	 2B	 3B	 4B	 5B	 6B	 7B	 8B	 9B
C								 8C	 9C

VM-4

FOR PUBLIC SECTOR LOCALS/UNITS, MAIL/EMAIL/POST AT LEAST 5 DAYS BEFORE ELECTION. FOR PRIVATE SECTOR LOCALS, MAIL AT LEAST 15 DAYS BEFORE ELECTION.

NOTICE TO CSEA MEMBERS **VOTING MACHINE ELECTION OF OFFICERS**

_____ (LOCAL) (UNIT)

Positions to be elected are listed below:

On _____, voting machine(s) will be located at _____.
(Date) (Location)

The polling places will open at _____ and will close at _____.
(Time) (Time)

If you are unable to vote in person, an absentee ballot may be obtained by contacting:

NAME:

ADDRESS:

PHONE #:

Email:

Deadline for receipt of completed absentee ballots is _____, _____ at the
(Time) (Date)
address on the return envelope: _____.
(Election Committee's Address on Return Envelope)

The counting of ballots will begin _____
(Date and Time)
at _____.
(Location)

** FACE COVERINGS AND SOCIAL DISTANCING ARE REQUIRED. **

Candidates are permitted to attend as observers, at their own expense, each phase of the election process. Candidates may designate, in writing, persons, who must be members in good standing, to serve as their observers (also at their own expense).

TO BE ELIGIBLE TO VOTE, A MEMBER MUST BE A MEMBER IN GOOD STANDING AS OF APRIL 1ST.

VM-5

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME, AFL-CIO

REQUEST FOR ABSENTEE BALLOT

* PLEASE PRINT CLEARLY. *

Date of Request _____

Time of Request _____

NAME: _____

10-DIGIT CSEA ID NUMBER: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

I cannot vote in person on Election Day because:

- COVID-19 pandemic**
- On vacation
- In the hospital
- Pass day
- Other/explain:

Signature

Date

VM-6

ABSENTEE BALLOT LOG

<u>Date</u>	<u>Name & 10-digit CSEA ID#</u>	<u>Reason</u>	<u>(1) Date Mailed or (2) Ineligible</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____
18.	_____	_____	_____
19.	_____	_____	_____
20.	_____	_____	_____

S A M P L E

VM-7



C H A L L E N G E D B A L L O T

_____ (LOCAL) (UNIT) **ELECTION**

PRESIDENT (vote for one)	EXECUTIVE VICE PRESIDENT (vote for one)	1st VICE PRESIDENT (vote for one)	2nd VICE PRESIDENT	3rd VICE PRESIDENT (vote for one)	SECRETARY	TREASURER
<input type="checkbox"/> Robert Hall	<input type="checkbox"/> Bruce Fox	<input type="checkbox"/> Peter Peck	Bill Beck <i>(Unopposed/Elected)</i>	<input type="checkbox"/> Sue Bee	Peg Notes <i>(Unopposed/Elected)</i>	Roger Money <i>(Unopposed/Elected)</i>
<input type="checkbox"/> Betty Brown	<input type="checkbox"/> Ed Daley	<input type="checkbox"/> David Long		<input type="checkbox"/> Kathy Gray		
	<input type="checkbox"/> Tom Farmer					
	<input type="checkbox"/> Douglas Knight					

*** SEE INSTRUCTIONS ON BACK ***

VM-7

INSTRUCTIONS FOR COMPLETING AND RETURNING YOUR BALLOT

13. Read the ballot carefully before marking.
14. Mark the box for the candidate of your choice. Take your ballot and mark an “x” in the box near the name of the candidate of your choice. If there is no “x” marked in the appropriate box, no vote will be recorded.
15. Vote for one candidate only for each office (except indicated otherwise).
16. Where there are one or more slates, you may vote for the entire slate by simply marking the slate designation box near the slate name. Such a mark will count as a vote for each individual on the slate. You may vote for individuals on any slate by marking the boxes near the names of the individual candidates you wish to vote for and not marking the slate designation box.
17. If both the slate designation box and boxes of opposing candidates for the same position are marked, it will be recorded as an overvote for the affected position(s).
18. No vote is needed for any candidate whose name appears with the notation “unopposed/elected.”
19. Write-in candidates are prohibited.
20. Any other markings may render the ballot invalid.
21. Do not put any other marks on your official ballot.
22. Do not sign or initial the ballot.
23. After you finish marking the ballot, place your ballot into the SECRET BALLOT ENVELOPE and seal it. Do not write or make any mark on the secret ballot envelope. Do not place anything other than the ballot in the secret ballot envelope.
24. Place the SECRET BALLOT ENVELOPE inside the outer envelope. Fill-out your name, address and 10-digit CSEA ID #. This is used to validate your eligibility to vote. Seal the outer envelope and return it to the committee-designated person.

FAILURE TO FOLLOW THESE RULES MAY VOID YOUR BALLOT

VM-8

Name _____

Address _____

10-digit CSEA ID #

CHALLENGED BALLOT

SECRET BALLOT

VM-9

Each eligible voter must sign the Voter Registration Log before receiving a ballot.

VOTER REGISTRATION LOG

_____ (LOCAL) (UNIT)

Date: _____

Location: _____

* PLEASE PRINT CLEARLY *

	<u>Name</u>	<u>10-digit CSEA ID#</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____
15.	_____	_____
16.	_____	_____
17.	_____	_____
18.	_____	_____

VM-10

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME/AFL-CIO

SIGN-IN SHEET FOR OBSERVERS BALLOT COUNT

_____ (LOCAL) (UNIT)

Date _____

Location _____

* PLEASE PRINT CLEARLY. *

	<u>Name</u>	<u>10-digit CSEA ID #</u>	<u>Candidate or Proxy for Candidate</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____
14.	_____	_____	_____
15.	_____	_____	_____

VM-11

TIE BREAKER CONSENT FORM

_____ (LOCAL) (UNIT)

We, the undersigned, having been fully advised of our rights as candidates to have a run-off election held to break the tie in the _____ election, hereby waive said right and consent to a coin toss to break the tie.

Signature of candidate

Date

Signature of candidate

Date

VM-12

VOTING MACHINE ELECTION REPORT

_____ [LOCAL/UNIT NAME]

Date _____

A. VOTING MACHINE OFFICIAL BALLOTS:

(1) TOTAL NUMBER OF MACHINE VOTERS: _____

B. ABSENTEE BALLOTS:

(1) NUMBER OF ENVELOPES ISSUED (if none, put "0"): _____

(2) NUMBER OF UNDELIVERABLE ENVELOPES RETURNED: _____

(3) NUMBER OF ENVELOPES RECEIVED BY
_____ a.m./p.m., _____, DEADLINE: _____

(4) TOTAL ABSENTEE BALLOT ENVELOPES NOT
PROCESSED FURTHER (i.e., no secret ballot envelope,
duplicate, missing or incorrect info on outer envelope): _____

(5) TOTAL VERIFIED ABSENTEE BALLOT ENVELOPES
(B3 - B4): _____

(6) TOTAL ABSENTEE SECRET BALLOT ENVELOPES
NOT PROCESSED FURTHER (i.e., secret ballot envelopes
missing ballots or containing multiple ballots): _____

C. ABSENTEE BALLOTS PROCESSED (B5 - B6): _____

NUMBER OF INVALID BALLOTS BY CATEGORY:

(1) NUMBER OF BALLOTS CONTAINING A VOTER
IDENTIFYING MARK (i.e., initials, name, etc.): _____

(2) NUMBER OF BALLOTS ENTIRELY VOID FOR
CONTAINING MORE THAN ONE VOTE IN EVERY
RACE (Over votes): _____

VM-12

Absentee Ballots (continued)

- (3) NUMBER OF BALLOTS CONTAINING NO VOTES
(Under votes): _____
- (4) NUMBER OF INVALID ABSENTEE BALLOTS
(C1 + C2 + C3): _____
- (5) NUMBER OF VALID ABSENTEE BALLOTS (C - C4): _____

D. CHALLENGED BALLOTS:

- (1) NUMBER OF CHALLENGED BALLOTS DISTRIBUTED: _____
- (2) NUMBER OF CHALLENGED BALLOTS VERIFIED
(If not needed, put "0"): _____
- (3) NUMBER OF INVALID CHALLENGED BALLOTS: _____
- (4) NUMBER OF VALID CHALLENGED BALLOTS: _____

**E. TOTAL NUMBER OF ENVELOPES AND BALLOTS
REJECTED/INVALID (B4 + B6 + C4 + D3):** _____

**F. TOTAL NUMBER OF VALID BALLOTS
COUNTED (A1 + C5 + D4):** _____

G. TOTAL VOTES BY CANDIDATE: *(List each & every candidate by position with # votes received. Note the winner(s) with * asterisk. Note those who were "elected-unopposed.")*

<u>Candidate Name</u> <i>(Example: Robert Hall)</i>	<u>Position</u> <i>(Example: President)</i>	<u>Number of Votes</u> <i>(Example: 19 votes)</i>
--	--	--

Certified by the Election Committee on _____, 20__.

[Committee signatures]

VM-13

1. **SEND NOTICE OF RESULTS TO CANDIDATES BY MAIL.**
2. **DISSEMINATE NOTICE OF RESULTS TO MEMBERSHIP (MAIL/EMAIL/POST ON BULLETIN BOARDS, ETC.)**

NOTICE TO CANDIDATES & MEMBERSHIP OF ELECTION RESULTS

Listed below are the results of the voting machine election conducted by the Election Committee

on _____ at _____.
(Date) (Location)

<u>Candidate Names</u>	<u>Office</u>	<u>Number of Votes Received</u>
------------------------	---------------	---------------------------------

(Signature of Election Chairperson)

Any member believing himself/herself aggrieved by any aspect of the election process may file a written protest postmarked or electronically filed within ten (10) calendar days after the member knew or should have known of the act or omission regarding which they are complaining. The written protest must be sent to the appropriate supervising Election Committee as set forth below. The Supervising Election Committee will send all other candidates affected by the protest a copy of the protest and give adequate time for responses. Protests are not anonymous. The burden of proof is on Protester(s).

ELECTION

SUPERVISING ELECTION COMMITTEE

Local: Statewide Election Committee and simultaneously with the Local Election Committee. Contact the Statewide Election Committee for more information at 1-800-342-4146, ext. 1447.

Unit: Local Election Committee and simultaneously with the Unit Election Committee. Contact your Local Election Committee for more information.

BALLOT TALLY
SHEET AND
MASTER TALLY
SHEET
FORMS

*TO BE USED IN
ALL TYPES OF ELECTIONS*

T-3

SAMPLE

(USING BALLOT ON PAGE 25 AS AN EXAMPLE)

SAMPLE

BALLOT TALLY SHEET

Batch No. 1

LOCAL/UNIT NAME & NUMBER: Local 123 State Local
(Enter Local/Unit Name & Number)

Note: Put five tally marks (||||) in each numbered box (1 tally mark = 1 vote)

Recorder: Dana Sanchez

Reader: Taylor Connors

Candidate Names	1	2	3	4	5	6	7	8	9	10	FINAL TALLY
(Justice Slate)											
Robert Hall											19
David Long											17
Beverly Johnson											16
Kathy Gray											17
Tony Bond											19
Eden Park											18
Kay Clay											17
Ronald Short											19
Juan Rivers											18
Pearl Button											7
Donald Duke											6
(Liberty Slate)											
Betty Brown											11
Peter Peck											11
George Green											12
Sue Bee											14
Martin Jones											14
Jackie Jetson											13
Ann Card											14
Forest Tree											12
Ruth Booth											11
OVERVOTES											1
UNDERVOTES											0

19 tally marks = 19 votes for Hall
17 tally marks = 17 votes for Long
...and so on.

Start with Column 1.
1 vote = 1 tally mark.
1 slate vote = 1 tally mark for each person on slate.
5 tally marks per box.
When counting is complete, add up each candidate's tally marks going across and enter total in Final Tally column.

T-4

SAMPLE

(USING BALLOT ON PAGE 25 AS AN EXAMPLE)

SAMPLE

MASTER TALLY SHEET

No. 1

LOCAL/UNIT NAME & NUMBER: Local 123 State Local
(Enter Local/Unit Name & Number)

NOTE: ENTER VOTES BY CANDIDATE FROM BALLOT TALLY SHEETS INDICATING BATCH NUMBER AT THE TOP OF THE COLUMN.

Candidate Names	Batch No. 1	Batch No. ____	Batch No. ____	Batch No. ____	Batch No. ____	Batch No. ____	TOTAL
(Justice Slate)							
Robert Hall	19						19
David Long	17						17
Beverly Johnson	16						16
Kathy Gray	17						17
Tony Bond	19						19
Eden Park	18						18
Kay Clay	17						17
Ronald Short	19						19
Juan Rivers	18						18
Pearl Button	7						7
Donald Duke	6						6
(Liberty Slate)							
Betty Brown	11						11
Peter Peck	11						11
George Green	12						12
Sue Bee	14						14
Martin Jones	14						14
Jackie Jetson	13						13
Ann Card	14						14
Forest Tree	12						12
Ruth Booth	11						11
OVERVOTES	1						1
UNDERVOTES	0						0

Add up totals from batches going across and enter grand total. In this scenario, there was only 1 batch.

ELECTION RESULTS FORMS

*TO BE USED FOR
ALL TYPES OF ELECTIONS*



Election Results CERTIFICATION AND REPORT FORM

Upon completion of your election, you must complete this set of forms to certify the results. You may electronically file this form through the CSEA website, fax to the number above, or you may mail the completed forms to the Statewide Secretary, 143 Washington Avenue, Albany, New York 12210. Your responsibility is not complete until these forms are completed and filed with Headquarters. If you have any questions about this form, please call 1-800-342-4146, ext. 1257.

Please complete applicable section below:

LOCAL ELECTION ONLY	Local Name: _____
	Local #: _____ Region #: _____
	Local Address*: _____ _____
	* Local Office mailing address — otherwise, please use the newly elected Local President's mailing address
	Local Phone #: (____) _____
Local Fax #: (____) _____	

UNIT ELECTION ONLY	Local Name: _____
	Unit Name: _____
	Unit#: _____ Local#: _____ Region#: _____

Please check the appropriate box below:

- If the election was CONTESTED (races), please attach a copy of the Election Report providing the actual counts for each candidate
- UNOPPOSED (no races)

Certified by:

PRINT NAME OF ELECTION CHAIRPERSON, VICE CHAIR OR ADMINISTRATOR (where applicable)

SIGNATURE OF ELECTION CHAIRPERSON, VICE CHAIR OR ADMINISTRATOR (where applicable)

DATE OF ELECTION or, if unopposed, LAST DATE of NOMINATIONS/APPLICATION PERIOD

Only the Election Meeting Chair, Election Committee Chair, Election Committee Vice Chair or CSEA Administrator (where applicable) is authorized to sign these results.

ER-1

FIRST VICE PRESIDENT

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

.....
SECOND VICE PRESIDENT

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

ER-1

THIRD VICE PRESIDENT

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

.....
FOURTH VICE PRESIDENT

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

ER-1

FIFTH VICE PRESIDENT

10-Digit CSEA ID # _____

First Name _____ MI _____ Last Name _____ (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City _____ State _____ Zip + 4 _____

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City _____ State _____ Zip + 4 _____

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

SIXTH VICE PRESIDENT

10-Digit CSEA ID # _____

First Name _____ MI _____ Last Name _____ (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City _____ State _____ Zip + 4 _____

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City _____ State _____ Zip + 4 _____

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

ER-1

SECRETARY

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK

Employment
JOB TITLE: _____

.....
SECRETARY-TREASURER

10-Digit CSEA ID # _____

(Applicable only for 150 members or less)

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK

Employment
JOB TITLE: _____

ER-1

TREASURER

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK

Employment
JOB TITLE: _____



ER-1

DELEGATE # of votes received: _____

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK

Employment
JOB TITLE: _____

.....
DELEGATE # of votes received: _____

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK

Employment
JOB TITLE: _____

ER-1

EXECUTIVE BOARD MEMBER

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

.....
EXECUTIVE BOARD MEMBER

10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (____) _____ Extension _____

Work Phone: (____) _____ Extension _____ (or beeper)

Fax: (____) _____ Cell: (____) _____

Home Address: _____

City State Zip + 4

Home Phone: (____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

ER-1

ALTERNATE DELEGATE # of votes received: _____ 10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (_____) _____ Extension _____

Work Phone: (_____) _____ Extension _____ (or beeper)

Fax: (_____) _____ Cell: (_____) _____

Home Address: _____

City State Zip + 4

Home Phone: (_____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____

.....
ALTERNATE DELEGATE # of votes received: _____ 10-Digit CSEA ID # _____

First Name MI Last Name (Sr., Jr., III)

Preferred First Name: _____ Gender: Male Female
(nickname)

D.O.B.: _____

Work Address: _____

City State Zip + 4

Work Phone: (_____) _____ Extension _____

Work Phone: (_____) _____ Extension _____ (or beeper)

Fax: (_____) _____ Cell: (_____) _____

Home Address: _____

City State Zip + 4

Home Phone: (_____) _____ Is it unlisted? yes no

Personal E-mail: _____

Please send mail to: HOME WORK Employment
JOB TITLE: _____