

Appendix I – Official State Council Teller’s Report – Alternate Election CTA

OFFICIAL STATE COUNCIL TELLER’S REPORT

ALTERNATE ELECTION

* Submit the Official State Council Teller’s Report (I), the Report of Results (I(a)), a copy of the timeline, and ballot to and certified electronic voting results to www.cta.org/electionshub/erc.

This form must be filled out completely.

We are using the numbered seat system

CHAPTER NAME (PLEASE DO NOT ABBREVIATE): _____

VOTING BEGAN: _____

VOTING ENDED: _____

Is this a run-off election? No Yes

If yes, please attach the Official State Council Teller’s Report from the election that caused the run-off.

Alternates must be elected by a plurality vote

		3. State Council Alternate Term of office: _____ Number of seats for this term: _____		4. State Council Alternate Term of office: _____ Number of seats for this term: _____	
Total Ballots Cast					
*Blank Ballots					
Illegal Ballots					
Legal Ballots Cast					
List all candidates on ballot if: (please check) ☐ Separate election was conducted	List all runners-up from Representative election if: (please check) ☐ Runners-up become Alternate(s)	Candidate Name	Votes Received	Candidate Name	Votes Received
List Write-Ins (if any)					

*A **blank ballot** is defined as not having a vote marked for a position on a ballot that has been cast.

List Reason(s) for Illegal Ballots: _____

PLEASE PRINT CLEARLY - MINIMUM TWO (2) SIGNATURES REQUIRED

Elections Committee Chair Name

Elections Committee Chair Signature Date

Email Address: _____

Phone Numbers

Home: _____

Cell: _____

Chapter Office: _____

Elections Committee Member Name

Elections Committee Member Signature Date

Elections Committee Member Name

Elections Committee Member Signature Date