

Report of Elections

Please print clearly. *Signatures are requested at the bottom of page 2.*

Region / Fraternity _____ **#** _____

Place of Election _____ **Date** _____

Nominations Chair _____

Secretary of Elections _____

Teller _____

Teller _____

Presider _____

Ecclesial Witness _____

RESULTS OF ELECTION

Minister _____

Address _____

Phone _____

Email _____

Vice-Minister _____

Address _____

Phone _____

Email _____

Secretary _____

Address _____

Phone _____

Email _____

Treasurer _____

Address _____

Phone _____

Email _____

Director of Formation _____

Address _____

Phone _____

Email _____

Councilor (1) _____

Address _____

Phone _____

Email _____

Councilor (2) _____

Address _____

Phone _____

Email _____

Councilor (3) _____

Address _____

Phone _____

Email _____

(Copy this sheet if additional spaces for Councilors are needed. Each additional sheet must be signed.)

Attested to: *(Please sign)*

Secretary of Elections _____

Presider _____

Friar Witness _____

Teller _____

Teller _____