Lay Fraternities of St. Dominic – Province of St. Joseph

REGIONAL COUNCIL ELECTION REPORT FORM

(Please* PRINT *Your Responses)

NOTE:
- **Complete a separate form for each elected position.**
- **Following approval, copy of election is to be sent to Provincial Council and Regional Council Presidents**

Region: _____ Region Name: _____

Date of Election: _____

Number Eligible to be Elected: _____ Number of Voters: _____

Number to be Elected: _____ Term: ❑ 3 yrs ❑ Other

If Other, please explain: _____

POSITION TO BE ELECTED:

REGIONAL: ❑ President & 1st Del. PC ❑ Vice President & 2nd Del. PC ❑ Treasurer ❑ Secretary ❑ Alt. Delegate PC

CANDIDATES	1st BALLOT	2nd BALLOT	3rd BALLOT	ELECTED COUNCILOR

Elected Councilor actively participates in Fraternity apostolate: ❑ Yes ❑ No

Elected Councilor has paid required dues to Fraternity, Region and Province: ❑ Yes ❑ No

Elected Councilor has publicly promised adherence and obedience to the Rule, Constitutions, Statutes, Norms, Declarations of the Master of the Order, and Particular Directory of the Lay Fraternities of St. Dominic, Province of St. Joseph: ❑ Yes ❑ No

All terms begin on the January 1 following the elections.

Elected Signature: _____

Submitted for approval by: _____ **Date:** _____

❑ **Approved** ❑ **Not Approved** **Date:** _____

Provincial President: _____

Cc: Provincial President; Provincial Archives; Regional President Prov: 08/08

Rev: 06/09, 04/10, 12/17, Rev:6/2019