Absentee Nomination and Ballot Request Form Local Lodge 1731

Members requesting to nominate, vote in the October endorsement vote, and/or vote in the November election by absentee should make those requests as soon as possible. Absentee nomination forms must be received by September 23, 2022. Absentee ballots for the October endorsement vote meeting must be received by October 28, 2022. Absentee ballots for the November election must be received by November 29, 2022.

You must mail this **Request Form** via United States Postal Service (USPS) to <u>IAM Air Transport District Lodge 142, PO Box 51416, Phoenix,</u> <u>AZ 85076-1416,</u>10 days prior to the nomination/voting date set forth in the **Notice of Nominations and Elections**. You may deliver in person this request to <u>IAM Air Transport District Lodge 142 Secretary-Treasurer, 9633 S. 48th St., Suite 175 Phoenix, AZ 85044-8627 no later than 10 calendar days before the nomination meeting, endorsement meeting and/or the election meeting as set forth in the notice of election. Only 1-member request per envelope or deliver in person by the member only.</u>

Please print and carefully enter the requested information. Clearly check the box next to the form/ballot(s) you are requesting. Complete information is needed to process your request.

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| Name (Print): | Email: | _ |
|---|---|---------------------------|
| Nember Phone Number: | Cell Phone No: | |
| treet Address: | | |
| ity: | State: | Zip: |
| request a mail-in Nomination Form for the following | | |
| I reside more than 25 miles from the designated le | | |
| I am confined due to an illness or injury, including | concerns related to COVID 19. | |
| I will be on family leave. | | |
| I will be on vacation (active employees only). | o I will be on official IAM business | |
| I will be on employer assignment/at work. I am retired and will be more than 25 miles from n | o I will be on military leave. | |
| I am retired and will be more than 25 miles from h | ly residence. | |
| equest a Local Lodge Endorsement Vote Form fo | or the following reason(s). Check all reasons that ap | ply: |
| I reside more than 25 miles from the designated le | | |
| I am confined due to an illness or injury, including | concerns related to COVID 19. | |
| I will be on family leave. | | |
| I will be on vacation (active employees only). | o I will be on official IAM business | |
| 1 3 8 | o I will be on military leave. | |
| I am retired and will be more than 25 miles from n | ny residence. | |
| request an Absentee Ballot for the November elec | tion for the following reason(s). Check all reasons t | hat apply: |
| I reside more than 25 miles from the designated le | | |
| I am confined due to an illness or injury, including | concerns related to COVID 19. | |
| I will be on family leave. | | |
| I will be on vacation (active employees only). | o I will be on official 1AM business | |
| | o I will be on military leave. | |
| I am retired and will be more than 25 miles from n | ny residence. | |
| ignature: | /Date | |
| ignature: (Member Signature Required) | | |
| | | |
| | | |
| DL 142 Absentee Ballot Reques | t Form September 2, 2022 | Page 1 of 1 |