

# Ohio Civil Service Employees Association Officers Information Sheet

Print name & Title. Only the President, Vice President, Secretary or Election Committee Chairperson is authorized to supply this information. Please note whether you have a Secretary or a Secretary/Treasurer.

**Chapter Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<p>Officer Elected To: _____ (Name of Assembly/Council or Both)</p> <p>Last 4 digits of Social Security No. _____</p> <p>Name: _____</p> <p>Address: _____ _____</p> <p>Work phone: (    ) _____</p> <p>Home phone: (    ) _____</p> <p>Home Email: _____</p> <p>Cell: (    ) _____</p> <p>Date of Election _____</p> <p>Person Replaced: _____</p>	<p>Officer Elected To: _____ (Name of Assembly/Council or Both)</p> <p>Last 4 digits of Social Security No _____</p> <p>Name: _____</p> <p>Address: _____ _____</p> <p>Work phone: (    ) _____</p> <p>Home phone: (    ) _____</p> <p>Email: _____</p> <p>Cell: (    ) _____</p> <p>Date of Election _____</p> <p>Person Replaced: _____</p>
<p>Officer Elected To: _____ (Name of Assembly/Council or Both)</p> <p>Last 4 digits of Social Security No. _____</p> <p>Name: _____</p> <p>Address: _____ _____</p> <p>Work phone: (    ) _____</p> <p>Home phone: (    ) _____</p> <p>Email: _____</p> <p>Cell: (    ) _____</p> <p>Date of Election: _____</p> <p>Person Replaced: _____</p>	<p>Officer Elected To: _____ (Name of Assembly/Council or Both)</p> <p>Last 4 digits of Social Security No _____</p> <p>Name: _____</p> <p>Address: _____ _____</p> <p>Work phone: (    ) _____</p> <p>Home phone: (    ) _____</p> <p>Email: _____</p> <p>Cell: (    ) _____</p> <p>Date of Election: _____</p> <p>Person Replaced: _____</p>

I, \_\_\_\_\_ attest the above information is accurate.

Revised 05/06 delfchfm