

Unit Election Report

Southeast Louisiana Council Chilantakoba Lodge 397
 Council Name Lodge Lodge # Chapter

Troop or Team: _____ Date Of Election: _____

Number of Registered Members: _____ Number of Youth Present: _____

Note: At least half of the registered active youth must be present to hold an election

(Fill in names and ranks of eligible youth before election)

Name	Rank	Check If Elected	Name	Rank	Check If Elected

I certify that the above youth members are eligible and approve them as nominees for election.

_____ () _____
 Unit Leader's Name Home Phone # Unit Leader's Signature

Number of members eligible: _____

Number of ballots turned in: _____ Number of votes needed for election: _____

Number elected: _____

Deliver or Mail to:

Election Team Members:

Lodge Elections Chairman
 Chilantakoba Lodge #397
 4200 South I-10 Service Road West
 Suite 101
 Metairie, LA 70001

Chapter Elections Chairman's Signature: _____

For Office Use only:

Date form Received: _____ Date entered into the Computer: _____

Lodge Election Chairman's Signature: _____

Elected Youth Information

1) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

2) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

3) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

4) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

5) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

6) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

7) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

8) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

9) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

10) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

11) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

12) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

13) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____

14) Name: _____ Birth Date: _____ Phone #: () _____

Address: _____ City: _____ State: _____ Zip: _____