

International Association of Machinists and Aerospace Workers

District Lodge 75

**SAMPLE BALLOT**



District Lodge 75 Business Representative Election Four (4) YEAR TERM	
Business Representative	
Vote for <b>FIVE (5)</b> / see instructions	
Randy Garrett	<input type="radio"/>
William "Matt" Griggs	<input type="radio"/>
Regina Ullrich-Holmes	<input type="radio"/>
Anthony Holton	<input type="radio"/>
Clementine "Tina" Jenkins	<input type="radio"/>
Jere Jochen	<input type="radio"/>
Stephen "Steve" Jordan	<input type="radio"/>
Mark Lewellyn	<input type="radio"/>
Jamie Littlefield	<input type="radio"/>
Richard "Rick" Pierce	<input type="radio"/>
Bradley "Brad" Smith	<input type="radio"/>
David Story	<input type="radio"/>

**INSTRUCTIONS TO VOTERS**

- \* Use a BLACK PEN or PENCIL to fill in the oval.
- \* **TO VOTE** for a person whose name is printed on the ballot, fill in the oval  to the right of the name. Below are samples of markings of an oval for a candidate.
 

<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	← CORRECT MARKINGS
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	← WRONG MARKINGS

The marking **CAN NOT** touch another oval.
- \* NO write-in votes will be counted.
- \* **Failure** to vote for the correct number of candidates than the "VOTE FOR #" indicated will **VOID** that portion of the ballot.
- \* If you make a mistake on the ballot, return the ballot to an election official and obtain another ballot. **DO NOT ERASE.**
- \* Do not write your name or any other identifying marks on the ballot.
- \* Failure to follow instructions could VOID Ballot or a portion of the Ballot, and your vote will not be counted.

**INSTRUCTIONS TO VOTERS**

**FOLLOW INSTRUCTIONS** →

\*\*\* \*\* Take the completed Ballot to the BALLOT BOX and place in BALLOT BOX face up | DO NOT TEAR or FOLD this Ballot. \*\*\* \*\*

--- --- --- --- This stub MUST be removed before placing the ballot in the ballot box. \*\*\* \*\*

Dues Card Number: \_\_\_\_\_ L.L.: \_\_\_\_\_ / D. L.: 75 S-I.R.#: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Please Print

Retiree:  **or** Employed on contract:  \_\_\_\_\_  
check the box that applies to you Name of employer if working on a contract

\*\*\* \*\* This stub MUST be removed before placing the ballot in the ballot box. \*\*\* \*\*

