



ASSOCIATES OF VIETNAM VETERANS OF AMERICA, INC.

INCORPORATED STATE OR CHAPTER BALLOT

DATE OF ELECTION: _____

PLEASE CHECK THE BOX NEXT TO THE ELECTION IN WHICH YOU ARE PARTICIPATING:

Voting for State Officers In the State of: _____

Voting for Chapter Officers For Chapter #: _____

NOTE: You must choose from the candidates who are running for office at the time of your election. You will have been provided a list of those candidates. You may not run "from the floor", nor may you use write in candidate names. Decide on who you are voting for in each office and fill in the name in the appropriate line below.

I CAST MY VOTE FOR THE FOLLOWING:

PRESIDENT: _____

VICE-PRESIDENT: _____

SECRETARY: _____

TREASURER: _____

- **YOU MAY NOT CHOOSE MORE THAN ONE PERSON IN ONE OFFICE.**