

Please complete and **RETURN FORM BY JULY 7,** 2017 to:

Credentials Committee / NACo Attn: Alex Koroknay-Palicz 660 North Capitol St, NW, Suite 400 Washington, DC 20001

By signing this form you are declaring that you and the other conference attendees from your county have agreed that you are the voting delegate for your county.

If your ballot is not picked up at

2017 CREDENTIALS VOTINGFORM	You may also fax this form to: 866.370.9421 or scan and e-mail this form to: akpalicz@naco.org or have the voting delegate(s) carry it with him/her to the NACo conference and present it at the Credentials Desk. If you do not plan on registering for the 2017 Annual Conference, there is no need to fill out and return this form. Your county/parish/borough MUST have at least one paid conference registration to be able to vote.	the 2017 Annual Conference the President of your State Association will pick up and cast your county's votes unless you check the box below. If my ballot is not picked up, I DO NOT AUTHORIZE my state association to pick up or cast my county's vote. I understand that my county's votes will NOT be cast if I select this option.
PLEASE TYPE OR PRINT IN BLOCK LETTERS.		
County / Parish / Borough		State
Name your county / parish /borough's delegate (s)		
Designated County Delegate First Name	Last Name	
Job Title / Description		
County Alternate		
First Name	Last Name	
Job Title / Description		
Please note: This form must be signed by the CHIEF ELECTED OFFICIAL from your county. Submissions without an appropriate signature will not be accepted Signature of Chief Elected Official (Board President / Chair / elected County Executive / Judge / Mayor)		
Print Name	Title	