

**YOUTH CANDIDATE ELECTION REPORT**

Troop \_\_\_\_\_ Location \_\_\_\_\_

ELECTED CANDIDATES

	NAME	ADDRESS	CITY	ZIP	PHONE	Date of Birth
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____	_____
9.	_____	_____	_____	_____	_____	_____
10.	_____	_____	_____	_____	_____	_____

UNIT LEADER INFORMATION

NAME \_\_\_\_\_

OA Unit Representative: \_\_\_\_\_

PHONE: (H) \_\_\_\_\_

Phone: \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

No Need to have a OA election Date: \_\_\_\_\_