**ABATE OF OHIO, INC.**

**MEMBERSHIP REPORT AUTHORIZATION**

Region ____

<table>
<thead>
<tr>
<th>Officer Name</th>
<th>Officer Title</th>
<th>County</th>
<th>Roster</th>
<th>Labels</th>
<th>Emails</th>
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<td>Region Director</td>
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Electronic reports will be sent as requested.

Region Director Name ________________________________

Region Director Signature __________________________ Date ____ / ____ / ____
ABATE OF OHIO, INC.

MEMBERSHIP REPORT AUTHORIZATION

**Characteristics:**

1. Category: Member.
2. Established by: Bylaws Article V: Membership; Section 5: Membership Records.
3. Purpose: To authorize who will receive electronic copies of membership data and the format of the data.
4. Audience: Region Directors.
5. Required? Yes.

**Directions:**

1. Region – indicate region number.
2. Officer Name – name of officer being authorized to receive the data.
3. Officer Title – title of officer being authorized to receive the data.
4. County – first four letters of county name or “ALL” for each separate county or “REG” for the entire region listed together on one report.
5. Roster – check if membership roster is authorized.
6. Labels – check if mailing labels are authorized.
7. Emails – check if email list is authorized.
8. Region Director Name – of region director.
9. Region Director Signature – of region director.
10. Date – of signature in mm/dd/yy format.

**Special Cases:**

1. Any changes must be sent to the MEMSEC in writing or from a recognized email address of the Region Director.
2. Data will not be sent until authorization is received.
3. Timing of reports to be established between MEMSEC and authorized requestor.

**Handling:**

1. Send to: MEMSEC.