

League of Women Voters of Wisconsin
State Election Administration Study, 2007-2009
MEMBER AGREEMENT REPORTING FORM

League of Women Voters of _____

Person Completing Form _____

phone/e-mail address _____

Number of Persons in Your League _____

Number of Persons Participating in Consensus _____

Number of Persons Participating in Discussion Units _____

Number of Persons Participating as Individuals _____

How Were Your Members Prepared for Consensus?

General Meeting _____

Discussion Units _____

State Materials _____

Other Materials _____

Other _____

The Election Administration Study Committee would be pleased to receive the name of any members of your League who would like to be active on Election Administration issues. Please list names, phone numbers, and e-mail addresses below.

Name: _____
Phone: (____)____ - _____ Email: _____

Name: _____
Phone: (____)____ - _____ Email: _____

Name: _____
Phone: (____)____ - _____ Email: _____

Mail or e-mail the completed form by February 20 to:
LWVWI Education Fund, Election Administration Study Committee
122 State Street, # 201A, Madison, WI 53703
e-mail address: lwwisconsin@lwwwi.org