

RESIDENT COMMISSIONER ELECTION



Are you interested in helping to **GOVERN** the Authority, **DEVELOP** current and future programs, and **APPROVE** contracts?

RUN FOR RESIDENT COMMISSIONER & JOIN THE BOARD

A qualified candidate is any resident of the AHA or Section 8 recipient for at least 30 days prior to the election, is 18 years of age or older, and is in good standing as a resident.

Just get **50 signatures** from fellow residents of AHA or Section 8 to secure a nomination-and, don't worry, you will receive training and support once elected to the Board.

Important Dates

Voter & Candidate Informational Meetings

1:00 pm to 2:00 pm

8/20/15 Townsend Community Room, 8/21/15 Westview Community Room

6:00 pm to 7:00 pm

8/26/15 Ida Yarbrough-Everly Cromwell Community Center

8/27/15 North Albany Homes-Community Center

*candidates interested in running must attend one informational meeting

9/15/15 Completed Petitions Submitted to Development Manager or AHA Office
Reception at 200 South Pearl Street

10/5/15 6:00 to 7:30pm Meet the Candidates!

AHA Main Office 200 South Pearl Street

*mandatory for all candidates

10/13/15 ELECTION DAY

all ballots must be received or post marked by

10/13/15

Questions? Contact Seanan Herrick at sherrick@caresny.org or 489.4130 x 101



Autoridad de Vivienda de Albany (Albany Housing Authority, AHA)

ELECCIÓN DE COMISIONADO RESIDENTE



¿Está interesado en ayudar a **GOBERNAR** la Autoridad, en **DESARROLLAR** programas actuales y futuros y en **APROBAR** contratos?

POSTÚLESE PARA COMISIONADO RESIDENTE Y ÚNASE A LA JUNTA

Un candidato calificado es cualquier residente de la AHA o beneficiario de la Sección 8 durante al menos 30 días antes de la elección, que tiene 18 años de edad o más y que está en buenas relaciones como residente.

Simplemente junte **50 firmas** de otros residentes de AHA o de la Sección 8 para asegurarse una candidatura y, no se preocupe, ya que recibirá capacitación y apoyo una vez elegido para formar parte de la Junta.

Fechas importantes

Reuniones informativas para votantes y candidatos

de 1:00 p.m. a 2:00 p.m.

8/20/15 Townsend Community Room, 8/21/15 Westview Community Room

de 6:00 p.m. a 7:00 p.m.

8/26/15 Ida Yarbrough-Everly Cromwell Community Center

8/27/15 North Albany Homes Community Center

*los candidatos interesados en postularse deben asistir a una reunión informativa

9/15/15 Las solicitudes completadas deben enviarse al Gerente de Desarrollo o a la Oficina de Recepción de AHA en 200 South Pearl Street

10/5/15 de 6:00 a 7:30 p.m. ¡Conozca a los candidatos!

Oficina Principal de AHA 200 South Pearl Street

*obligatorio para todos los candidatos

10/13/15 DÍA DE LA ELECCIÓN

se deben recibir o matasellar todas las papeletas de voto al
10/13/15



¿Preguntas? Comuníquese con Seanan Herrick escribiendo a sherrick@caresny.org o llamando al 489.4130 x 101

ALBANY HOUSING AUTHORITY RESIDENT COMMISSIONER NOMINATION PETITION

I, the undersigned, do hereby nominate the following named person as a candidate for Resident Commissioner for the Albany Housing Authority Board of Commissioners voted for during the Resident Commissioner Election for 2015 – 2017 Term. **Name of Candidate:** _____

I, the undersigned, do hereby state I am an eligible voter of the Albany Housing Authority and:

- That my present place of residence is truly stated opposite my signature below and I am a resident of Albany Housing Authority OR Section 8 program for 30 days on or before October 13, 2015
- That I am 18 years of age or older
- Understand that it is prohibited for anyone to sign this petition with any name other than one’s own, to knowingly sign one’s name more than once for the same candidate, and to knowingly sign the petition when not an eligible resident voter

Si necesitas de una petición en Español o si necesitas ayuda con la dirección, porfavor contactar Seanan Herrick at 518.489.4130 x 101.

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***A Minimum of 50 signatures from AHA &/OR SECTION 8 RESIDENTS is required for nomination.**

I have witnessed the above signatures: _____

Completed petition must be submitted to the Manager's Office of any of the AHA developments or with the Section 8 Department at the Main Office by September 15, 2015 by 4:00 pm.

Received by _____ Date _____

AHA Office Name and address _____

I, _____, have submitted a minimum of 50 signatures in order to be nominated as a candidate for Resident Commissioner on the Albany Housing Authority Commissioner Board. I do hereby submit this written consent to the Albany Housing Authority that I will serve, if elected.

Signature Date



ALBANY HOUSING

AUTHORITY

200 S. Pearl Street, Albany, New York 12202

RETURN SERVICE REQUESTED