



Buffalo Teachers Federation, Inc.  
271 Porter Avenue  
Buffalo, New York 14201  
(716) 881-5400  
[www.btfny.org](http://www.btfny.org)

President, PHILIP RUMIORE

**March 20, 2017**

MEMBERS OF THE B.T.F. WILL BE ELECTING 2 DELEGATES AND A MAXIMUM OF 2 SUCCESSOR DELEGATES TO THE 2017, 2018, AND 2019 NEA CONVENTIONS.

THE COMPLETE SET OF PROCEDURES FOR THE ELECTION HAS BEEN DISTRIBUTED TO ALL DELEGATE CHAIRPERSONS AND SHOULD BE POSTED ON THE B.T.F. BULLETIN BOARD. ADDITIONAL COPIES ARE AVAILABLE FROM THE B.T.F. OFFICE AND ON THE BTF WEBSITE; [www.btfny.org](http://www.btfny.org)

NOMINATIONS MUST BE MADE ON A PETITION FORM. PETITIONS FOR BOTH THE DELEGATE AND SUCCESSOR DELEGATE POSITION ARE ON THE BACK OF THIS REPORT. ADDITIONAL PETITIONS MAY BE OBTAINED FROM THE B.T.F. OFFICE OR ON THE BTF WEBSITE; [www.btfny.org](http://www.btfny.org) .

ALL B.T.F. MEMBERS ARE ELIGIBLE TO RUN FOR ELECTION AND TO NOMINATE CANDIDATES.

THE QUALIFYING SIGNATURES (5 FOR DELEGATES; 3 FOR SUCCESSOR DELEGATES) MAY NOT INCLUDE THAT OF THE CANDIDATE.

THE 2017 NEA CONVENTION WILL BE HELD JULY 1<sup>ST</sup> TO JULY 6<sup>TH</sup> IN BOSTON, MASSACHUSETTS.



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**N O M I N A T I O N P E T I T I O N**

I hereby accept nomination for the position of **Delegate** to the NEA Convention.

\_\_\_\_\_  
 Signature Date

Print your name as you wish it to appear on the ballot.

\_\_\_\_\_

Qualifying Signatures:

	<u>Print Name</u>	<u>School</u>	<u>Member's Signature</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

This petition must be received by Certified Mail, Return Receipt Requested, or hand-delivered to the BTF Office prior to **5:00 p.m. on April 4, 2017.**

***Candidates or their agents who hand deliver nomination forms must obtain a receipt for the nominating petition and must retain this receipt for any possible challenge related to the delivery of such petition. This receipt is the only proof that will be accepted as evidence of timely submission of the petition.***

\_\_\_\_\_  
 School Home Address City State Zip

EMAIL (***PERSONAL ONLY***)  
 ADDRESS: \_\_\_\_\_

Telephone: Cellular: \_\_\_\_\_  
 Other: \_\_\_\_\_