



CITY OF MIAMI, FLORIDA
OVERTOWN ADVISORY BOARD/OVERTOWN COMMUNITY OVERSIGHT BOARD
FORMS FOR VOTERS/ELECTORS

To be completed by the VOTER and submitted to election staff prior to casting a ballot for Overtown Advisory Board/Overtown Community Oversight Board Election, to be held at the CULMER CENTER at 1600 N.W. 3RD AVENUE, by 6:00 P.M. on TUESDAY, AUGUST 23, 2016.

I, _____, am a qualified voter for members of the **Overtown Advisory Board/Overtown Community Oversight Board (OAB/OCOB)**. I am 18 years of age or older and as proof of my qualifications as an elector of the **OAB/OCOB**, I hereby submit my credentials as indicated below:

1. I am a resident of the Overtown Area residing at _____
_____ or
2. I am the owner of property in the Overtown Area located at _____ or
3. I am an employee or Board Member of _____
community development corporation or community based organization located in and providing services to the Overtown Area, at the address _____, or
4. I operate or am an employee of a business in the Overtown Area located at _____

FOR OFFICIAL USE ONLY:			
RECOMMENDED PERSON'S ADDRESS INSIDE BOUNDARIES?	Y	N	N/A
RECOMMEND PERSON MEETS AGE REQUIREMENTS	Y	N	N/A
RECOMMENDED PERSON'S PROOF OF QUALIFICATION SUBMITTED:	_____		
ACCREDITED INSTITUTION INSIDE BOUNDARIES	Y	N	N/A