

**CERTIFICATION OF ELECTIONS**  
**COAST GUARD AUXILIARY D11SR**  
**To be filled out by Screening Committee Chairman**

Division / Flotilla: \_\_\_\_\_

Date of Election: \_\_\_\_\_

1. Election for (circle as applicable):                      DCDR/ VCDR                      FC/ VFC
2. Screening Committee Names: \_\_\_\_\_
- a. Screening Committee Chairman certifies that all nominees have met the current requirements.
- b. If no eligible members ran for office, a written waiver was requested, routed and obtained from DIRAUX **PRIOR** to election:  
Yes / No (copy of waiver presented to Presiding Officer)

\_\_\_\_\_  
**Screening Committee Chairman (print name and sign)**

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**To be filled out by Presiding Officer**

3. Quorum present at the meeting? Yes / No
- Number of voting members in flotilla/division \_\_\_\_                      Number present: \_\_\_\_\_
4. Nominations called for from the floor? Yes / No                      5. All provisions of the unit's Standing Rules met? Yes / No
6. Names of persons nominated by the committee:
- DCDR / FC: \_\_\_\_\_
- VCDR / VFC: \_\_\_\_\_
7. Names of persons nominated from the floor:
- DCDR / FC \_\_\_\_\_
- VCDR / VFC: \_\_\_\_\_
8. Confirm that all nominees meet election eligibility criteria or have appropriate waiver granted. Without waiver when needed, nominees are not eligible for election.
9. Names of tellers if used: \_\_\_\_\_
11. Results of the election (name and EMPLID): (PRINT)
- For DCDR / FC: \_\_\_\_\_                      Member Number: \_\_\_\_\_
- For VCDR / VFC: \_\_\_\_\_                      Member Number: \_\_\_\_\_
12. Name and title of elected officer from next highest unit if present for election \_\_\_\_\_
13. I, as an elected officer of the Coast Guard Auxiliary and this election's Presiding Officer, certify that each item above is correct
- Presiding Officer Name and Title (print): \_\_\_\_\_                      Member Number: \_\_\_\_\_
- Presiding Officer sign/date:** \_\_\_\_\_

**Send completed form to DCAPT within 5 days of election.**