Virginia School Boards Association
"Children Are Our Common Wealth"

December 9, 2011

TO: School Board Chairmen
Division Superintendents

FROM: David Smith, Director
VSBA Insurance Services Programs

RE: Request for Official Voting Representative
to the VSBA Insurance Services Programs

In accordance with Article I, Section 6 of the VSBA Insurance Services Programs By-Laws, each participating Insurance Services pool member school division "shall have one vote… at any annual or special meeting…". Such member may be an "elected or appointed" member of the participating school board.

Please complete and return by fax the enclosed Official Voting Representative Form by **January 9, 2012.**

Thank you for your support in our pools.

Rivanna Ridge Professional Building • 200 Hansen Road, Suite 2 • Charlottesville, Virginia 22911
(434) 295-8722 • Fax: (434) 295-8785 • Homepage: www.vsba.org

VSBA Insurance Services Programs
Official Voting Representative

Name: _____

Address: _____

_____

_____

Phone: **(W)** _____ **(H)** _____

Email: _____

School Division: _____

Please Fax This Form To
The VSBA Office (434) 963-4776

Attn: Lisa Thacker
By January 9, 2012