

TO: (Paste address label of Local President here.)

Enclosed are materials for the 2014 AFT-Oregon Convention. A sufficient supply of forms is enclosed. Please contact the AFT-Oregon office if you have questions or if you need extra materials.

COPIES ENCLOSED

- 1. Delegate and Alternate election certification forms _____
- 2. Credential cards _____
- 3. Advance registration cards _____
- 4. Officer and Delegate Elections information _____
- 5. Certified mail forms/directions _____
- 6. Return envelope _____
- 7. Hotel room reservation information sheet _____

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CREDENTIAL INFORMATION

LOCAL NUMBER

ESTIMATED MEMBERSHIP
JANUARY-DECEMBER 2013

ESTIMATED DELEGATE STRENGTH

CONVENTION VOTE AND DELEGATE STRENGTH

Your estimated delegate strength for the 2014 Convention, based on percapitas from January, 2013 through your last month paid in 2013, is written above. It may change because the final number of delegates will be determined from the membership average for the calendar year immediately preceding the month of the convention.

CREDENTIAL LISTS AND CREDENTIAL CARDS

Credential lists are enclosed (Larger Locals may need to use more than one sheet). You may send as many delegates as your average membership allows according to the formula in Article IX, Section One of the AFT-Oregon Constitution. Submit names of all those elected, both delegates and alternates, even if they say they cannot attend. **Keep the blue credential cards. All delegates must show their credential card upon check-in at convention.**

New Locals chartered during the year preceding the convention may receive representation at the convention based on the average for the number of months of affiliation.

CONVENTION COMMITTEES

Please list a preferred committee choice for each delegate. The President will assign each delegate to a committee with approval by the Executive Council. Committees review all policy resolutions submitted by Locals. The delegate's preferred choice will be considered, but final assignment will be made according to a number of factors.

HOTEL RESERVATIONS

Hotel reservation information is enclosed. Please make your reservations directly with the hotel following the instructions on the enclosed room reservation mailer.

Please note the cut-off for reservations in the block of rooms set aside for the convention. After that date, reservations are accepted only if space is available.

SCHEDULE OF CONVENTION PREPARATIONS

- Const. and Bylaw Amendments *Postmarked by*..... February 3, 2014
- Delegate and Alt. Credential Lists *Postmarked by* March 5, 2014
- Resolutions *Postmarked by*..... March 5, 2014
- Advance Registration *Postmarked by* March 5, 2014
- Hotel Room Reservation Deadline March 5, 2014
- Convention Dates April 4-6, 2014

Please note the dates for submission of amendments and resolutions to the AFT-Oregon office. Any submission after the dates indicated will not be in conformance with constitutional requirements for consideration by the convention. Delegates, and alternates in their place as needed, will be seated only if delegate credentials are received in the AFT-Oregon office by the deadline and percapita payments are current through the required period for seating at the convention.

MATERIALS SENT TO THE LOCAL PRESIDENT

Materials enclosed include:

- Delegate and Alternate Credential Lists**
- Blue Credential Cards**
- Advance Registration Cards**
- Return Envelope and Certified Mail Materials**
- Hotel Room Reservation Information Sheet**

If you are no longer president, please be sure to pass the enclosed important materials to the new president. Refer to the Convention Call for questions on this material.

LOCAL NUMBER

PRINT DELEGATE'S NAME (LAST NAME FIRST)

LOCAL INITIALS

STREET

CITY

STATE/ZIP

SPECIAL CREDENTIAL FOR NON-AFFILIATED AFT LOCAL IN OREGON AFT-Oregon, AFT, AFL-CIO

We certify that the person herein named was duly elected: a delegate [] an alternate []
to the Annual Convention of AFT-Oregon, AFT, AFL-CIO. Given under our hands and seal this _____ day of
_____, 2014.

IMPORTANT! This credential card must be presented by the delegate at the Registration Desk at the Convention.

S E A L

_____ President

_____ Secretary

LOCAL NUMBER

PRINT DELEGATE'S NAME (LAST NAME FIRST)

LOCAL INITIALS

STREET

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tion Desk at the Convention.**

S E A L

President

Secretary

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S E A L

President

Secretary

ADVANCE REGISTRATION FOR 2014 CONVENTION
AFT-Oregon, AFT, AFL-CIO

NAME _____ LOCAL NO. _____

ADDRESS _____ PRIMARY EMAIL _____

CITY _____ STATE _____ ZIP _____

HM PHONE _____ WK PHONE _____ FAX _____

PREFERRED COMMITTEE CHOICE (Please mark one): Constitutional Amendments Collective Bargaining Issues
 Economic Issues Elections Human Rights and Community Relations Legislative Issues Resolutions

Enclosed is my **check number** _____ for \$ _____.

_____ person(s) convention registration(s) at **\$70 for delegates or alternates**. The registration fee is a single rate covering the entire convention including the Saturday evening awards banquet.
_____ **banquet guests at \$55 each** for the Saturday evening awards banquet only.

Advance registrations must be sent to the AFT-Oregon office postmarked not later than March 5, 2014. Seating at awards banquet is by advance registration only.

RETURN TO: Convention Registration, AFT-Oregon, AFT, AFL-CIO, 10228 SW Capitol Hwy., Portland, OR 97219

ADVANCE REGISTRATION FOR 2014 CONVENTION
AFT-Oregon, AFT, AFL-CIO

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ADDRESS _____ PRIMARY EMAIL _____

CITY _____ STATE _____ ZIP _____

HM PHONE _____ WK PHONE _____ FAX _____

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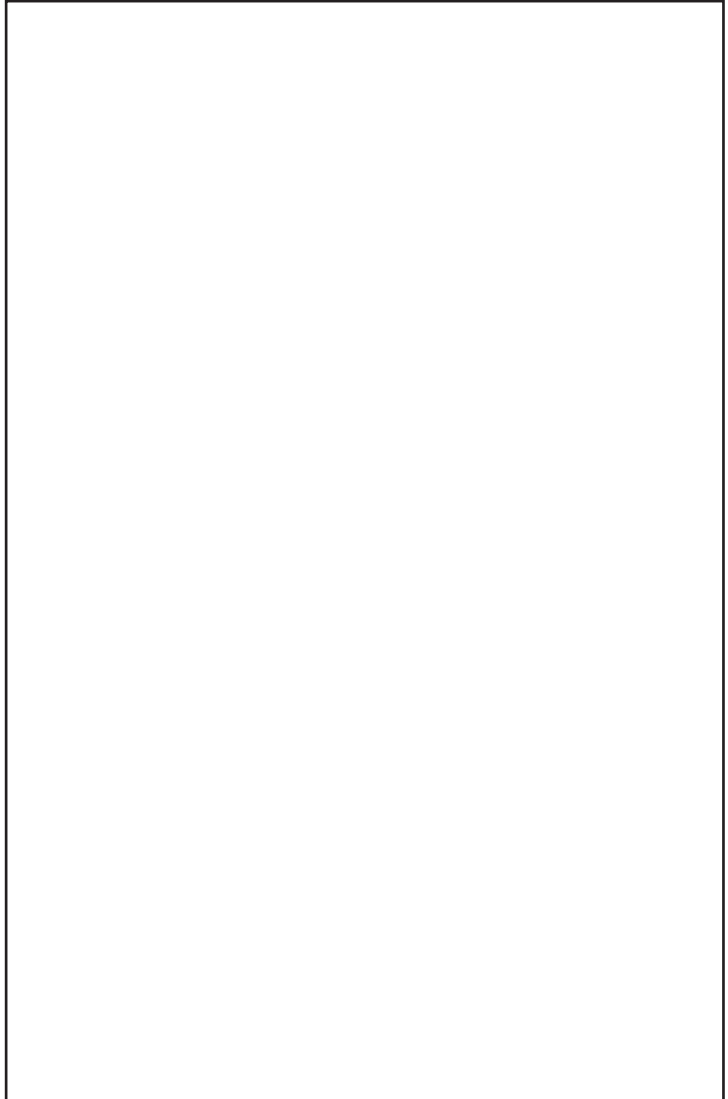
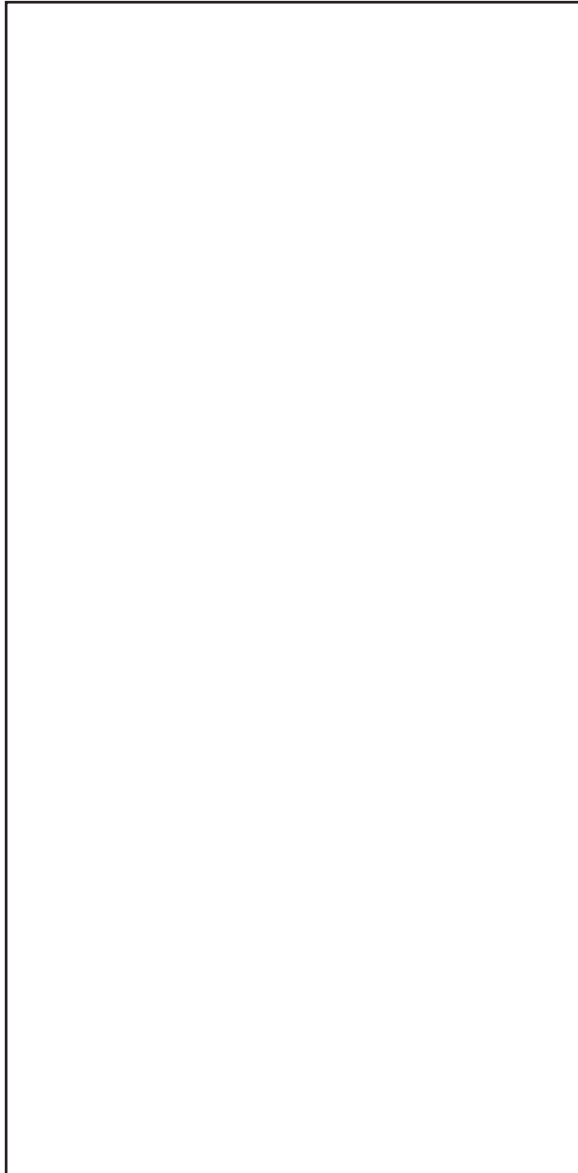
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Instructions for Using Certified Mail

1. Complete the Certified Mail sticker and affix to front of envelope. Tear off receipt portion.
2. Complete the green return receipt form and attach to back of envelope.
3. Affix proper postage. The current rates are:

\$.46	for the first ounce
\$.20	for each additional ounce up to 3.5 ounces
\$ 3.10	Certified Mail charge
\$ 2.55	Return Receipt charge



Display Table Reservation

AFT-Oregon 2014 Convention

Yes, please reserve a table for our Local with the other vendors.

Name: _____

Local No.: _____

Local Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Return by March 1, 2014 to:

**AFT-Oregon Convention
10228 SW Capitol Hwy.
Portland, Oregon 97219**

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