



HOA Elections Gal LLC

EDUCATION AND ELECTIONS

Request for Proposal

Contact Name: _____

Email Address: _____

Phone Number: _____

Name of management company (if applicable): _____

Legal name of association: _____

For Inspector of Election attendance, will the meeting be virtual or in-person?

(If in-person, please provide address of the meeting and confirm Wifi access)

Virtual In-person (address is _____)

HOA has Wifi access (Wifi information: _____)

Number of Properties/Units in HOA: _____ City: _____

Type of Election (Board of Directors, Recall of Board of Director(s), CC&Rs/Bylaws Amendment, Special Assessment, Bank Loan, etc.): _____

For Board of Director recall elections ONLY, is the entire board being recalled or individual member(s)? _____

For CC&Rs/Bylaws Amendment or Special Assessment, the estimated number of pages to be included in the election package: _____

Special instructions, comments, questions _____

Please email **Bylaws and Election Rules** to: hoaelectionsgal@gmail.com