ELECTION SUPERVISOR FORM 9

NOMINATION MEETING REPORT

1.	Local Union/System Fed./Gen. Com. of Adjustment	TCRC	of the
	Check one of the boxes below:		
	□ IBT □ GCC □ BMWED □ BLETD		
2.	Date and time of meeting February 16, 2021 0900 ET		
3.	Location of meeting 1510 - 130 Albert Street Ottawa, ON K1P 5G4	_	
4.	Total number of nomination meetings held for this Local 1		
5.	Chair of Meeting Don Ashley		
	Local Union Position (if any) National Legislative Director		
6.	Number of persons in attendance1		
7.	Number of Delegate Positions 13 Alternates 3		
8.	Were any slate forms submitted? • Yes • No		
9.	Did you conduct a lottery for ballot placement? • Yes	• No	
10.	Name of person completing report Christopher Friesen		
11.	Was there an Election Supervisor representative at the meeting?	• Yes	• No
12.	Name of Election Supervisor Representative		-
13.	Check: • White Ballot • Contested Election		
14.	Comments regarding any unusual incidents or improper conduct:		

Important Note:

You must submit this report to the Office of the Election Supervisor no later than within three (3) days of the nomination meeting. The Election Supervisor may be contacted at:

Office of the Election Supervisor for the International Brotherhood of Teamsters 1990 M Street, N.W., Suite 650 Washington, D.C. 20036 844-428-8683 Toll Free

electionsupervisor@IBTvote.org

Please attach to this report:

- 1. Completed Candidate Information Sheets (Election Supervisor Form 4) for each candidate.
- 2. Copies of any Slate Declaration Forms (Election Supervisor Form 10) submitted. Candidate and slate names must be listed as they are to appear on the ballot.
- 3. Order of candidates following ballot position lottery.

All Election Supervisor Forms are available under the Official Forms Tab at ww.ibtvote.org