



San Diego

Association of Health Underwriters

April 2017

Notice is hereby given to the members of the San Diego Association of Health Underwriters.

The election of the Board of Directors for fiscal year July 1, 2017 – June 30, 2018 will take place at the **Annual Meeting** of the membership on **Thursday, May 18, 2017**. This meeting will be held at the Handlery Hotel San Diego, 950 Hotel Circle North, San Diego 92108 at 12:00 pm.

In accordance with the Bylaws, we are pleased to announce the following nominees:

Name of Nominee:	Board Position:
Sean Greene, CHRS Morrison Insurance Services	President
Stacey Moskowitz Kaiser Permanente	President – Elect & Member Retention
Mark Haskell, CHRS Haskell Enrollment and Insurance Services, LLC	Immediate Past-President
Jessica Walker Schulte Insurance Agency	VP of Communications & Media Relations
Barry Cogdill, LPRT, CHRS Business Choice Insurance Services	VP of Finance
Jim Morrison, RHU, REBC, CLU, HIP, LPRT, CHRS Morrison Insurance Services	VP of Legislation
Scott Maichel, CHRS AmCheck	VP of Membership
Terri Yurek Terri Yurek Insurance	VP of Political Action Committee (PAC)
Ricky Haisha Haisha Insurance Services	VP of Professional Development
Fred Cartier Rogers Benefit Group	Member at Large – Awards
Joel Marcus Joel Marcus Insurance	Member at Large – Philanthropy
Mike Freeman, CLU Countywide Health Insurance Services, Inc.	Member at Large – Sponsorship
Craig Gussin, CLU, LPRT, CHRS Auerbach & Gussin Insurance and Financial Services	Member at Large
Pedro Reyes Barney & Barney, A Marsh McLennan Agency, LLC	Member at Large
Stephanie San Antonio, RHU, LPRT, CHRS Stephanie San Antonio, RHU, LPRT Insurance Services	Member at Large

Voting Ballot

If you are unable to attend the May 18th meeting, please cast your vote and sign / date at the bottom of the ballot. Ballot must be received in the Association office no later than the close of business on **Wednesday, May 17, 2017**. Please fax or email to: (858) 630-3793 or sdahu1@yahoo.com.

Vote to Accept Slate of Officers: _____ Approve _____ Reject

Date: _____

If you are proposing a nomination by proxy, please indicate name of person and office:

Name: _____
(Print Name) _____ (Signature) _____