Notification of Voting Delegate & Alternate

Our Authority's Board of Directors hereby name the following individuals to serve as Voting Delegate and Alternate Delegate:

Voting Delegate

Name: _____

Title: _____

Alternate Delegate

Name: _____

Title: _____

Authority submitting this information:

Authority: _____

Address: _____

City: _____ State: _____ Zip: _____

Designated Voting Delegate or Alternate Delegate will receive an identification card at the Registration Booth at the PMAA Annual Conference.

Please note this form must be returned to the PMAA office by Friday, August 14, 2026.