



**ECAM 2019 ANNUAL ELECTIONS SEMINAR AND CERTIFICATION TRAINING**  
**IP CASINO HOTEL & SPA – BILOXI, MISSISSIPPI**  
**January 23, 24, 25, 2019**

**PLEASE REGISTER EARLY!**

**Print Name:** LeRoy Lacy  
 (Legal name as it appears on your ID)

**Address** P.O. Box 858 City CANTON Zip 39046

**Phone (Home)** 601-859-9843 (Work) 601-859-2627 (Cell) 601-941-5895

**Congressional District** 02 **Supervisor District** 05 **County** Madison

**EMAIL** (Confirmation will be done by email provided): lacy5\_@aol.yahoo.com

Please check appropriate box: County Election Commissioner  **Circuit Clerks ONLY/ NOT D.C.!**

Newly Elected/Appointed Election Commissioner/Clerk:  Other

**Name of Election Commission Chairperson** PATRICIA Truesdale

**Name of Roommate:** \_\_\_\_\_

List only if this person is an Election Commissioner

**Spouse/Guest Meal Tickets: Will be available for purchase at the convention.**

**DO NOT SEND MONEY FOR SPOUSE/GUEST MEAL TICKETS WITH THIS FORM**

(There will be **NO** spouse or guest tickets sent in advance of the training).

Ticket prices are: Breakfast- \$30 each-- lunch buffet- \$39 each-- banquet tickets-\$48 each.

**ECAM MEMBER**

**County Election Commissioner -- (Includes Wednesday & Thursday in Hotel)** \$ 370.00  
 Registration Fee - \$330.00 + Dues - \$40.00 = \$370.00

**ECAM ASSOCIATE MEMBER -- (Includes Wednesday & Thursday in Hotel)** \$ \_\_\_\_\_  
 Registration Fee - \$330.00 + Dues - \$35.00 = \$365.00

**ECAM MEMBER ATTENDING CONVENTION--BUT NOT STAYING IN HOTEL** \$ \_\_\_\_\_  
 Registration Fee - \$200.00 + Dues - \$40.00 = \$240.00

**ECAM ASSOCIATE MEMBER ATTENDING CONVENTION--BUT NOT STAYING IN HOTEL** \$ \_\_\_\_\_  
 Registration Fee - \$200.00 + Dues - \$35.00 = \$235.00

**EXTRA NIGHTS REQUESTED:**  1/21/2019 @ \$70.00  1/22/2019 @ \$70.00 \$ \_\_\_\_\_

**NOTE: ALL FUNDS MUST BE SENT TO ECAM TREASURER-----NOT THE HOTEL!**

**LATE REGISTRATION FEE** After December 1, 2018 ADD \$50.00 \$ \_\_\_\_\_

**The Registration fee pays for two nights stay at the hotel. Any other nights are your responsibility at the current hotel rate and must be booked and paid by each individual! If you do not fill out the information below, you will be subject to what is available!**

Single King  Double/Queen  Smoking  Non-Smoking  Handicap

**Special Needs:** \_\_\_\_\_

**TOTAL Amount Enclosed** (MAKE ALL CHECKS PAYABLE TO ECAM) \$ 370.00

**Regular registration deadline is December 1, 2018 – Cancellation required by January 10, 2019**

**NO refunds after January 10, 2019 cancellation date!**

**I understand and agree to these Terms:** [Signature] Date: 10-1-18

**MAIL THIS FORM AND ALL CHECKS TO:** Hon. LARRY GARDNER  
 2 SUMMERFIELD PLACE  
 NATCHEZ, MS 39120

Contact #: 601-807-5262, Email: [legard@aol.com](mailto:legard@aol.com)

**DON'T FORGET SILENT AUCTION ITEMS**

## Welcome to the ECAM 2019 Certification and Training Seminar

Election Commissioners are required by state statute to train annually on how to conduct elections. It is vital that we participate and make every effort to learn as much as possible while there. Please participate and show respect to all presenters as well as the staff of the IP Casino Resort and Spa.

- Please fill out the form “properly” and turn it as quickly as possible to Larry Gardner: ECAM treasurer. Please pay attention to the information on the form and follow the instructions provided. Due to limited training space, registration will be on a “First Come” “First Served” basis. It would be great if ALL commissioners throughout the state would attend the seminar so we can all participate in one place at one time.
- Anyone wanting to come in on Monday 1/21/19 or Tuesday 1/22/19, the rate is \$70.00 per night and must be paid TO THE ECAM TREASURER. Please note on the registration form any extra nights you are requesting and pay accordingly. The nightly rates are ECAM’s block rate and must be booked under our block. FOR THE WEEKEND BEFORE AND AFTER ECAM, SEE RED NOTE AT THE BOTTOM OF THIS PAGE FOR THE HOTEL RATES.
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REMEMBER TO BRING YOUR NAME BADGE ISSUED BY THE SOS!



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**IP CASINO HOTEL & SPA – BILOXI, MISSISSIPPI**  
**January 23, 24, 25, 2019**

**PLEASE REGISTER EARLY!**

**Print Name:** Julia R. Hodges  
 (Legal name as it appears on your ID)  
**Address:** 468 West Place City Madison Zip 39110  
**Phone (Home):** \_\_\_\_\_ (Work) 601-790-2542 (Cell) 601-906-9780  
**Congressional District:** 3rd **Supervisor District:** 2nd **County:** Madison  
**EMAIL (Confirmation will be done by email provided):** julia.hodges@madison-co.com  
**Please check appropriate box:** County Election Commissioner  **Circuit Clerks ONLY/ NOT D.C.!** \_\_\_\_\_  
**Newly Elected/Appointed Election Commissioner/Clerk:** \_\_\_\_\_ **Other:** \_\_\_\_\_  
**Name of Election Commission Chairperson:** Pat Truesdale  
**Name of Roommate:** \_\_\_\_\_

List only if this person is an Election Commissioner

**Spouse/Guest Meal Tickets: Will be available for purchase at the convention.**

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Single/King  Double/Queen  Smoking  Non-Smoking  Handicap

**Special Needs:** \_\_\_\_\_

**TOTAL Amount Enclosed (MAKE ALL CHECKS PAYABLE TO ECAM)** \$ 440.00

**Regular registration deadline is December 1, 2018 + Cancellation required by January 10, 2019**

**NO refunds after January 10, 2019 cancellation date!**

**I understand and agree to these Terms:** [Signature] **Date:** 10/22/18

**MAIL THIS FORM AND ALL CHECKS TO:** Hon. LARRY GARDNER  
 2 SUMMERFIELD PLACE  
 NATCHEZ, MS 39120

Contact #: 601-807-5262, Email: [legard@aol.com](mailto:legard@aol.com)

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**PLEASE REGISTER EARLY!**

**Print Name:** Patricia Truesdale  
 (Legal name as it appears on your ID)

**Address** 306 W. Porter St. **City** Ridgeland **Zip** 39157

**Phone (Home)** 601-856-7884 **(Work)** 601-790-2543 **(Cell)** 601-613-7203

**Congressional District** 3 **Supervisor District** 3 **County** MADISON

**EMAIL** (Confirmation will be done by email provided): pat.truesdale@madison-co.com

**Please check appropriate box:** County Election Commissioner  **Circuit Clerks ONLY/NOT D.C.!**

**Newly Elected/Appointed Election Commissioner/Clerk:**  **Other**

**Name of Election Commission Chairperson** Patricia Truesdale

**Name of Roommate:** \_\_\_\_\_

List only if this person is an Election Commissioner

**Spouse/Guest Meal Tickets: Will be available for purchase at the convention.**

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**Special Needs:** \_\_\_\_\_

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**I understand and agree to these Terms:** Pat Truesdale **Date:** 10-18-18

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**PLEASE REGISTER EARLY!**

**Print Name:** Azzie Jackson Adams  
 (Legal name as it appears on your ID)

**Address:** 911 Adeline St. City Canton Zip 39046

**Phone (Home):** 6018592615 (Work) 6017902544 (Cell) 6014970739

**Congressional District:** 2 **Supervisor District:** 4 **County:** Madison

**EMAIL** (Confirmation will be done by email provided): \_\_\_\_\_

Please check appropriate box: County Election Commissioner  **Circuit Clerks ONLY/ NOT D.C.!** \_\_\_\_\_

Newly Elected/Appointed Election Commissioner/Clerk: \_\_\_\_\_ Other \_\_\_\_\_

**Name of Election Commission Chairperson:** Pat Innesdale

**Name of Roommate:** \_\_\_\_\_

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**Special Needs:** Handicap shower + (balist tall) high

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**I understand and agree to these Terms:** Azzie Jackson Adams Date: 10/18/18

**MAIL THIS FORM AND ALL CHECKS TO:** Hon. LARRY GARDNER  
 2 SUMMERFIELD PLACE  
 NATCHEZ, MS 39120

Contact #: 601-807-5262, Email: [legard@aol.com](mailto:legard@aol.com)

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**IP CASINO HOTEL & SPA – BILOXI, MISSISSIPPI**  
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PLEASE REGISTER EARLY!

Print Name: Timothy N. Jenkins  
 (Legal name as it appears on your ID)

Address 111 Marshals Way City Canton Zip 39046

Phone (Home) 601-260-5856 (Work) 601-790-2541 (Cell) 601-260-5856

Congressional District \_\_\_\_\_ Supervisor District 1 County MADISON

EMAIL (Confirmation will be done by email provided): timothy.jenkins@madison-co.com

Please check appropriate box: County Election Commissioner  Circuit Clerks ONLY/ NOT D.C.! \_\_\_\_\_

Newly Elected/Appointed Election Commissioner/Clerk: \_\_\_\_\_ Other \_\_\_\_\_

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