

MVRPC 2025 BOARD OF DIRECTORS DELEGATE FORM
Governmental Members

Jurisdiction Name: _____

*PLEASE NOTE: Your appointment (delegate only) must be an elected official.
The alternate can be either an elected official or the chief executive/administrative officer.*

Name of Delegate: _____

Title: _____

Term Expires: _____

Years Served on

MVRPC Board: _____

Office Address: _____

Preferred Mailing Address: _____

Main Office

Direct Line or

Phone: _____

Cell Phone: _____

Preferred Email: _____

Name of Alternate: _____

Title: _____

Term Expires: _____

Office Address: _____

Preferred Mailing Address: _____

Main Office

Direct Line or

Phone: _____

Cell Phone: _____

Preferred Email: _____

Billing Information (Who should we contact regarding member dues?)

Name: _____

Title: _____

Billing

Address: _____

Phone: _____

Email: _____



MIAMI VALLEY

Regional Planning Commission

MVRPC 2025 BOARD OF DIRECTORS DELEGATE FORM

Non-Governmental/Other Members

Organization Name:

PLEASE NOTE: Your appointment (both delegate and alternate) must be employees or appointed officials of your organization.

Name of Delegate:

Title:

Years Served on
MVRPC Board:

Office Address:

Preferred Mailing Address:

Main Office
Phone:

Direct Line or
Cell Phone:

Preferred Email:

Name of Alternate:

Title:

Office Address:

Preferred Mailing Address:

Main Office
Phone:

Direct Line or
Cell Phone:

Preferred Email:

Billing Information (Who should we contact regarding member dues?)

Name:

Title:

Billing
Address:

Phone:

Email:

PLEASE CHECK EACH COUNTY WITHIN THE MIAMI VALLEY YOUR ORGANIZATION SERVES			
<input type="checkbox"/>	Darke County	<input type="checkbox"/>	Preble County
<input type="checkbox"/>	Greene County	<input type="checkbox"/>	Shelby County
<input type="checkbox"/>	Miami County	<input type="checkbox"/>	Warren County
<input type="checkbox"/>	Montgomery County	<input type="checkbox"/>	