

REQUEST FOR AFFILIATION with the Libertarian Party of Georgia

(must be accompanied by Affiliate proposed bylaws)

Date: September 9th, 2020

We, the undersigned, request permission to create The Libertarian Party of Greater Athens (aka, Greater Athens Libertarian Party) and to be an official affiliate of The Libertarian Party of Georgia (LPGa).

LPGa bylaws require each affiliate to include three members of The Libertarian Party of Georgia, and to have at least three party officers. If at any time fewer than three people in the affiliate geography are members of LPGa, the affiliate automatically dissolves, with all affiliate property, supplies, bank accounts and contents of safe deposit boxes moving to the custody of the Libertarian Party of Georgia, to be returned when the affiliate is re-established.

I

Requested name: Libertarian Party of Greater Athens
(Preferred abbreviation: GATHLP)

II

The affiliate's geography consists of:

☒ Counties ☐ Campuses ☐ Cities

Barrow, Clarke, Greene, Jackson, Madison, Morgan,

Oconee, Oglethorpe, Walton


III


Contact information of proposed affiliate (can be the contact information of Chair or Vice-Chair)

Libertarian Party of Greater Athens
(c/o: _____)
Address 1: 1091 Christian Dr
Address 2: _____
City: Watkinsville, GA zip: 30677
Phone: (407) 267-0528
email: liberty@lpath.org
website URL: _____

IV

Initial officers (* = mandatory position):


Chairman*: Benjamin Young
(Signature:) 
Address 1: 1091 Christian Dr
Address 2: _____
City: Watkinsville, GA zip: 30677
Phone: (407) 267-0528
email: Benjamin Young

Vice Chairman*: Bobby Goins
(Signature:) 
Address 1: 349 Jackson Woods Rd
Address 2: _____
City: Maysville, GA zip: 30558
Phone: (502) 662-2094
email: goins0497@gmail.com

Treasurer:

(Signature:) _____
Address 1: _____
Address 2: _____
City: _____, GA zip: _____
Phone: () _____
email: _____

Secretary*: Colin McKinney

(Signature:)  _____
Address 1: 778 Hill St. _____
Address 2: _____
City: Athens _____, GA zip: 30606
Phone: (706) 286-0285 _____
email: cmckinneymd@hotmail.com _____

(Office: _____)

(Name of officer:) _____
(Signature:) _____
Address 1: _____
Address 2: _____
City: _____, GA zip: _____
Phone: () _____
email: _____

(Office: _____)

(Name of officer:) _____
(Signature:) _____
Address 1: _____
Address 2: _____
City: _____, GA zip: _____
Phone: () _____
email: _____

V

This Request for Affiliation with The Libertarian Party of Georgia is signed by three members of the proposed affiliate who are members of The Libertarian Party of Georgia:

1) Name: Gabbie Fox Date: 9/9/2020

Signature: _____

2) Name: Jonathan Weaver Date: 9/9/2020

Signature: _____

3) Name: Lawrence Sheppard Date: 9/9/2020

Signature: _____

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YOU MAY NOT REPRESENT YOUR ORGANIZATION AS AN AFFILIATE OF THE LIBERTARIAN PARTY OF GEORGIA UNTIL YOU HAVE RECEIVED NOTICE OF ACCEPTANCE OF THIS PETITION AND OF YOUR PROPOSED BYLAWS. At that time your secretary will have a legal obligation to submit the affiliate bylaws to the Board Of Elections in your county.