



Energy solutions for healthier homes  
**regon Energy Coordinators and Affiliates**

A COMMITTEE OF COMMUNITY ACTION PARTNERSHIP OF OREGON

*Helping families in need stay warm and safe!*

## OECA Transfer Form

*This form initiates the transfer an existing OECA full or affiliate membership from one staff person to another.*

**OECA Full Member**

**OECA Affiliate Member**

**Organization / Agency Name** \_\_\_\_\_

\_\_\_\_\_  
Current / Departing Member Name

\_\_\_\_\_  
New / Incoming Member Name

**Please provide the following information for the New/Incoming Member:**

Job Title \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email Address \_\_\_\_\_

\_\_\_\_\_  
Organization Director's Name (Print)

\_\_\_\_\_  
Director's Signature

**Mail, Email or Fax to:**

Jeff Sargent

C/O Community Action Partnership of Oregon

350 Mission St. SE, Suite 201, Salem, OR 97302

[jsargent@caporegon.org](mailto:jsargent@caporegon.org) / Fax: 503-363-0113