

Election Nomination Form

Member Name:	·	NICA Member Number:		
Telephone:	Cell Phone:			
Address:	City:	State:	Zip:	
I hereby submit my name in nomination fo of Directors. As a nominee I agree to abide support NICA and agree to abide by all po	e by the rules and regulations of the	election procedure. If e	lected, I pledge to	
Signature:		Date:		
We, the undersigned, as current regular material above named member to seek election to indicate our voting intentions, but does should be a second to be a	the NICA Board of Directors. We ur	derstand that signing th		
PRINTED NAME	SIGNATURE			
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Submit all materials by fax to **(813) 803-8460**, mail to **1043 E. Brandon Blvd. Brandon, FL 33511** or email to **nominations@nicainc.org**

COMPLETED FORM(S) AND MATERIALS MUST BE IN THE NICA OFFICE NO LATER THAN MAY 25th

Nominees must also include a biography, photograph suitable for publication, answers to the four questions outlined on the Statement of Commitment, and the signed Statement of Commitment. Required signatures may be gathered either in person, by email, or by fax; due to the differing methods involved, additional signature sheets will be accepted.