

Election Nomination Form

Member Name:		NICA Member Number:		
Telephone:	Cell	Cell Phone:		
Address:	City: _	State:	Zip:	
I hereby submit my name in nomination for of Directors. As a nominee I agree to abide support NICA and agree to abide by all pol	e by the rules and regulations of	the election procedure. If	elected, I pledge to	
Signature:		Date:		
We, the undersigned, as current regular m above named member to seek election to t indicate our voting intentions, but does sho	the NICA Board of Directors. We	e understand that signing t		
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 AUGUST 30TH

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 and Code of Ethics. Required signatures may be gathered either in person, by email, or by fax; due to the methods involved, additional signature sheets will be accepted.