



2024 NOMINATION FORM

We, the undersigned, hereby nominate: _____

This individual serves on the council or committee of the following municipality or local service district:

Dated this _____ day of _____, 2024.

AUTHORIZATION OF NOMINATION

Signature of Mayor/Deputy Mayor: _____
Signature *Please print*

Signature of CAO/Manager/Clerk: _____
Signature *Please print*

ACCEPTANCE OF THE NOMINATION

I, _____
Signature *Please print* accept the above nomination.

**THE DEADLINE TO NOMINATE A CANDIDATE IS
4:30PM, WEDNESDAY, MARCH 6, 2024**