



## RECOMMENDATION TO THE COMMITTEE ON NOMINATIONS

Conference: **Florida**

District: East Central

Date \_\_\_\_\_

**I recommend:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Age: 20's \_\_\_ 30's \_\_\_ 40's \_\_\_ 50's \_\_\_ 60's \_\_\_ 70's \_\_\_ 80's+ \_\_\_

Race/Ethnicity \_\_\_\_\_ Employed: Yes \_\_\_ No \_\_\_

**Why I think you should consider this person** (attach extra sheet if necessary):

**Positions I would recommend this person for:**

Signed \_\_\_\_\_

Mailing Address or Email \_\_\_\_\_

Phone: \_\_\_\_\_

Please return to: East Central District Chair, Committee on Nominations

