

Election Nomination Form

Member Name:		NICA Member Number:		
Telephone:	Cell Phone:			
Address:	City:	State:	Zip:	
I hereby submit my name in nomination for election of Directors. As a nominee I agree to abide by the support NICA and agree to abide by all policies, p	e rules and regulations of the ele	ection procedure. If e	lected, I pledge to	
Signature:	Date:			
We, the undersigned, as current regular members above named member to seek election to the NIC indicate our voting intentions, but does show sup	CA Board of Directors. We unde	rstand 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 SEPTEMBER 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.