



COUNTY OF SONOMA CHAPTER

CHAPTER OFFICER NOMINATION FORM

I/We the undersigned nominate _____

For the office of _____

Petitions must be signed by a minimum of five (5) County of Sonoma Chapter Steward. Use additional nomination forms as necessary to gather signatures

Printed Name	Signature	Date

Nominations may be mailed or dropped off in person to Attn. Election Committee, SEIU 1021, 600 B Street, Santa Rosa, CA 95401 or **faxed to SEIU 1021 Attn: Election Committee at (707) 542-1496 and must be received by 5pm on July 8th, 2019.** Nominees must be present or submit written notice of acceptance of nomination within seven (7) days of the deadline for nominations by July 15th 2019.

OVER ►

Acceptance of Nomination

I _____ disclose that if nominated for the
office of _____ I will accept the
nomination. I understand that if I want to rescind my acceptance I must do so in writing
to the attention of the Election Committee, SEIU 1021 so that it is received by 5pm on
July 15th 2019 at 600 B Street, Santa Rosa 95401 or faxed to (707) 542-1496

OVER ►