NOMINATION FORM

| I,(Print Name in Full) | nominate | |
|------------------------------------|----------------------|------------------------------|
| (Print Name in Full) | | (Print Name) |
| for the office or position of IBEV | V LOCAL 37 | |
| | Signature | |
| | Membership Card No |) |
| | | |
| NOMINATION ACCEPTANCE | | |
| I(Print Name in Full) | agree to allow my r | name to stand for the office |
| or position of IBEW LOCAL 37: | | |
| | (Office or Position) | |
| Signed by me this | _day of | , 2022. |
| (Member's Signature) | | |
| Membership Card No | | |