

TWU LOCAL 564

100 West Imperial Avenue, Suite R – El Segundo, CA 90245
Phone: 310-640-7430 - Fax: 310-640-7432

NOMINATION PETITION

We, the undersigned members in good standing, hereby nominate:

Brother/Sister _____ for the office of _____ .

- | | |
|-----------|-----------|
| 1. _____ | 14. _____ |
| 2. _____ | 15. _____ |
| 3. _____ | 16. _____ |
| 4. _____ | 17. _____ |
| 5. _____ | 18. _____ |
| 6. _____ | 19. _____ |
| 7. _____ | 20. _____ |
| 8. _____ | 21. _____ |
| 9. _____ | 22. _____ |
| 10. _____ | 23. _____ |
| 11. _____ | 24. _____ |
| 12. _____ | 25. _____ |
| 13. _____ | |

I hereby accept the nomination to the above named office. _____
Signature Date

I wish my name to appear as follows: _____
