STANDARD FORM FOR NOMINATION OF CANDIDATES LIONS OF WISCONSIN MULTIPLE DISTRICT 27

| Send copies to: | Date: |
|--|---|
| District Governor | District: |
| Chairman District Elections Committee | Year in which you are to hold office: |
| State Office md27stateoffice@wisconsinlions.gr | org Candidate for Office of: |
| | hald an |
| This is certify that at our Lions Club meeting | , held on, ne following Lion, who is a member in good standing, as a |
| candidate for the office listed herein. This ac | tion is part of the Club records and minutes. |
| oundate for the office ficted ficters. This do | tion to part of the olds records and mindles. |
| | |
| Name of Candidate: | Spouse or significant other name: |
| Mailing address: | |
| | |
| City and ZIP: | |
| Telephone number: | |
| | |
| Email address: | |
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| President | |
| | |
| Secretary | |
| Lions Club of | |