

NOMINATION FORM
FOR
TAC CHAIR

I nominate for TAC Chair

(name of candidate)

If I am nominating someone other than myself I verify I have contacted that person and received their permission to nominate him or her for this office.

Nominations forms must be received by no later than _____ at
2714 Billings Avenue, Helena, MT 59601

NOMINATION FORM
FOR
TAC VICE-CHAIRPERSON

I nominate for TAC Vice-Chairperson

(name of candidate)

If I am nominating someone other than myself I verify I have contacted that person and received their permission to nominate him or her for this office.

Nominations forms must be received by no later than _____
at 2714 Billings Avenue, Helena, MT 59601

NOMINATION FORM
FOR

TAC Secretary

I nominate for TAC ~~Chair~~ *Secretary*

(name of candidate)

If I am nominating someone other than myself I verify I have contacted that person and received their permission to nominate him or her for this office.

Nominations forms must be received by no later than _____ at
2714 Billings Avenue, Helena, MT 59601