

# Nomination Form

## ***COPE LOCAL 491 Regional Vice-President***

---

### **REGION 2 - ALBERTA**

*(Regional Office, Calgary, Fort McMurray, Grande Prairie, Lethbridge, Medicine Hat, and Red Deer)*

I, \_\_\_\_\_ nominate  
(Nominator, please print name)

---

(Please print name of nominee)

I, \_\_\_\_\_(signature)  
accept the nomination.

---

Signature of nominator

Date\_\_\_\_\_

### **Please return nomination form to:**

Crystal Fournier  
COPE 491 Returning Officer  
[Returningofficercope491@gmail.com](mailto:Returningofficercope491@gmail.com)

or  
c/o CUPE Terrace Area Office  
3210 Emerson Street  
Terrace, BC V8G 2R8