

# Nomination Form

## COPE LOCAL 491 Treasurer

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

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(Please print name of nominee)

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

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Signature of nominator

Date \_\_\_\_\_

**Please return nomination form to:**

COPE 491 Returning Officer  
[returningofficercope491@gmail.com](mailto:returningofficercope491@gmail.com)