

If you would like to nominate a person to be considered as a Board candidate, **please complete this form** and provide a resume and/or recommendation for the person youare nominating. Volunteers cannot serve on the Board and as an operational volunteer at thesame time.

Name of person making the nomination		Phone	Em	ail
□Resume included				
□Recommendation inc	cluded			
□Mrs. □ Miss	□ Ms. □ Mr.	□Othe <u>r:</u>		
Last Name		First		MI
Home Address				Telephone
City	County Residing		State	Zip Code
Business Address			Bu	usiness Phone
City doing Business	County doing	Business	State	Zip Code
Business Fax Cell Phone				
Email				
erin@hssaspokane.		perry, CEO at <u>bnev</u>	vberry@gsewni.o	ent Committee Chair, <u>rg</u> or mail the form to rahan.

~ GSEWNI Main line # 509-747-8091