

2024	INDIVIDUA	AI NOM	IINATING	PETITION
LULT			IIIAIIIA	

2024	INDIAI	DU	4L I		AIII	IAI	IIIC	3 P		ON						
We, the undersigned, h	ereby non	ninate	e:													
											-					
Print Candidate's Name				Petition ID Number*												
Candidate must check the position li	oox for the o									ormatio	on for	that p	ositio	n on	the	
										IMPOF	RTANT:					
For the position of: (Check One-REQUIRED)				No cross outs/correction fluid/correction tape on any of the affiliation boxes, or the petition will be deemed invalid.												
☐ PRESIDENT						_										
☐ VICE PRESIDENT					AFFILITATION: (Check One-REQUIRED)											
☐ SECRETARY-TREASURER					□ INDEPENDENT											
☐ TRUSTEE	☐ TRUSTEE					□ MEMBERS VOICE										
☐ REGIONAL COORDINATO	R from REG	ION#_			☐ MEMBERS UNITED											
☐ EXECUTIVE BOARD MEM	IBER															
	Se	at#							Agency I	Vame						
home zip code.  SIGNATURE PRINT FIRST AND LAST N																
SIGNATURE	PRINT	FIRST	AND L	ASI	NAIVII	=	PETITION ID NUMBER									
1. 2.																
3.													+			
4.												_	+			
5.												_				
6.												_				
7.												-				
8.												_				
9.												_				
10.																
11.												_ _	$\perp$			
12.									-							
I certify that, 1) I am a regular member of PEF eligible to sign petitions for the above office. I invalid. Handwritten signature only, digital	Please print na	me, Pe	tition IL													
Print Name:					Sign	ature:										
Petition ID Number:				_					Date:							