

## **Active Member Nomination Form**

I,(co-op name) no	ominates(candidate)
to run for the NASCO Board in the 2018-19 ele	
This decision has been approved by the board October 22, 2018 deadline for candidate state	d/membership and the candidate is aware of the ements.
We are aware that the board members pay a \$ (\$150 if they are not receiving support from the	\$200 travel deductible for each year of their term neir nominating cooperative).
We will pay the nominee's travel deductib	ole (\$200/year) for all 3 years of their term.
We will pay nominee's travel deductible (\$	\$200/year) for the first 2 years of their term.
We will pay this nominee's travel deductib	ble (\$200/year) for the first year of their term only.
We do not plan to pay this nominee's trav they will be responsible for paying a deductibl	vel deductible, and the nominee is aware that le of \$150/year or requesting a waiver.
Printed Name of Co-op Liaison	_
Co-op Liaison's Role in the Co-op	_
Email Address of Co-op Liaison	_
Phone Number of Co-op Liaison	_
Signature of Co-op Liaison	_
Date	_

Questions? Contact us at elections@nasco.coop.