

NOMINATION FORM Local 410 Trustees Committee

I,	hereby nominate NAME OF NOMINATOR (PLEASE PRINT)
	NAME OF NOMINATOR (PLEASE PRINT)
	NAME OF NOMINEE (PLEASE PRINT)
fo	the position of Trustee for a three year term with the Local 410 Trustees Committee.
— Sig	nature of Nominator
Iŀ	ereby accept Nomination to be a member of the Local 410 Trustees Committee
 Sig	nature of Nominee
	ms may be emailed to the address below provided they are received by March 29th at on.
	tions Committee for Local 410

21 Mews Place Suite 202 St. John's, NL A1B 4N2 mcompton@unifor410.ca