

NOMINATION FORM Local 410 Trustees Committee

I,		hereby nominate
,	NAME OF NOMINATOR (PLEASE PRINT)	- ,
	NAME OF NOMINEE (DI FACE DEVIT)	_
	NAME OF NOMINEE (PLEASE PRINT)	
fo	r the position of Trustee for a th	ree year term with the Local 410 Trustees Committee.
Sig	gnature of Nominator	
Ιŀ	nereby accept Nomination to be	a member of the Local 410 Trustees Committee
 Sig	gnature of Nominee	
	orms may be emailed to the addition.	ress below provided they are received by May 16 at
	ections Committee ifor Local 410	

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