



Nomination form for positions on the COF Board of Directors

Nomination for COF President (1 year term)

Name of Nominee: _____

Moved by: _____

Seconded by: _____

The nominee agrees to this nomination? Yes _____

Nomination for Treasurer (2 year term)

Name of Nominee: _____

Moved by: _____

Seconded by: _____

The nominee agrees to this nomination? Yes _____

Nomination for Member of the COF Board of Directors (2 year term)

Name of Nominee: _____

Moved by: _____

Seconded by: _____

The nominee agrees to this nomination? Yes _____

Nomination for Member of the COF Board of Directors (2 year term)

Name of Nominee: _____

Moved by: _____

Seconded by: _____

The nominee agrees to this nomination? Yes _____