



IAC OFFICER/DIRECTOR CANDIDATE PETITION

OFFICE SEEKING: _____

CANDIDATE INFORMATION:

Name: _____
(Print) First Middle Last IAC Number

Address: _____
Street City State Zip

Home Phone: _____ E-Mail: _____

Cell Phone: _____ IAC Chapter Affiliation: _____

SIGNATURE / DATE:

Candidate Signature DATE: _____
MM/DD/YY

MEMBER SIGNATURES

	SIGNATURE	PRINTED NAME	IAC#	EXPIRE DATE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10				
11.				
12.				
13.				
14.				
15.				

In order for this petition to be valid, it must contain signatures of at least ten (10) current IAC members. A resume and a recent photograph of the candidate must accompany this petition.

The Nominations Chairman must receive this petition no later than March 1st of the election year.

Send completed petitions to:

IAC Executive Director, P.O. Box 3086, Oshkosh, WI 54903-3086. Questions? Ph. 920-426-6574
e-mail to: execdir@iac.org