## IAC OFFICER/DIRECTOR CANDIDATE PETITION

OFFICE SEEKIN	G:					
CANDIDATE INFO	RMATION:					
Name:						
(Print)	First	Middle	Last	IAC Nur	nber	
Address:						
	Street		City	State	Zip	
Home Phone: _		E-Mail:				
Cell Phone: IAC Chapter Affiliation:						
SIGNATURE / DAT	E:					
		DATE	:			
Candidate Signature			MM/DD/YY			

## **MEMBER SIGNATURES**

	SIGNATURE	PRINTED NAME	IAC#	EXPIRE DATE
1.				
2.				
3.				
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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 April 12, 2019.

Send completed petitions to: Doug Sowder,118E High Dr., Spokane, WA 99203-2757.

Cell Phone: (509) 220-8206.Or e-mail to: dougsowder@gmail.com.