

Eastern Star Charity Foundation of New Jersey, Inc.

NOMINATION FORM

We, the undersigned, being members of the *Eastern Star Charity Foundation of New Jersey, Inc.* and members in good standing of separate and distinct Subordinate Chapters of the Order of the Eastern Star of New Jersey do offer in nomination for election at the Annual Meeting in May 20____, the name of:

for the office of DIRECTOR for a term of three (3) years, she/he being a member in good standing of

_____ Chapter # _____ District # _____

Order of the Eastern Star of New Jersey.

Name	Chapter Name & Number	District Number	Date

I, the undersigned, a member of the *Eastern Star Charity Foundation of New Jersey Inc.* and a member in good standing of _____ Chapter No. _____ Order of the Eastern Star of New Jersey, do agree that my name shall be placed in nomination for election for the office of DIRECTOR, for a term of three (3) years at the 20_____ Annual Meeting, and do agree, if elected, to fulfill the duties of the office in strict compliance with the By-Laws of the *Eastern Star Charity Foundation of New Jersey, Inc.*

Signed: _____

Dated: _____

Phone No. _____

Email: _____

PERTINENT QUALIFICATIONS SHALL BE PROVIDED In the SPACE BELOW: (May Attach Additional Sheet)

The original Nomination form must be received and filed with the Secretary of the Charity Foundation on or before March 1st. THE APPLICANT MUST BE PRESENT AT THE ANNUAL MEETING.

Secretary:

Address: