

# Petition for Office or Convention Delegate

*May petition for convention delegate-alternate*

Name: \_\_\_\_\_

Office Sought: \_\_\_\_\_

Acceptance of Nomination Signature: \_\_\_\_\_

	<i>Signature</i>	<i>Printed Name</i>	<i>Date</i>	<i>Unit</i>
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**Return completed forms to VFNHP office, 308 Pine St., Burlington, VT 05443**