

**NATURAL GAS CO-OP 52 Ltd  
NOMINATION FORM  
BOARD OF DIRECTORS**

**Candidate Information**

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell # \_\_\_\_\_

Email Address \_\_\_\_\_

Postal Address \_\_\_\_\_

Member of Natural Gas Co-op 52 Ltd since \_\_\_\_\_

Employment positions and skills you would bring to the board:

Areas of expertise relevant to natural gas co-operative business:

Other Board of Director Experience:

Community Service Involvement:

Reason for seeking election:

This information may be displayed on our website and in newspapers or newsletters. (Note: date of birth, phone and email information will not be displayed)

**I confirm I meet all the qualifications per the Natural Gas Co-op 52 Ltd Qualification of a Director and hereby let my name stand for the Board of Directors of Natural Gas Co-op 52 Ltd**

**I authorize Natural Gas Co-op 52 Ltd to verify my membership in good standing**

_____	_____	_____	_____
<b>Candidate Name</b>	<b>Signature</b>	<b>Account #</b>	<b>Date</b>

_____	_____	_____	_____
<b>Nominators Name</b>	<b>Signature</b>	<b>Account #</b>	<b>Date</b>