



Coastal Florida PBA Representative Nomination

I, _____ nominate _____
(please print) *(please print)*
to be the representative of the Coastal Florida PBA members at the

(please print - Name of Department)

Signature of person making nomination _____.

I, _____ second the nomination of _____
(please print) *(please print)*
to be the representative of the Coastal Florida PBA members at the

(please print - Name of Department)

Signature of person seconding nomination _____.

I, _____ accept the nomination as PBA representative
(please print)
for the members at the _____
(please print - Name of Department)

Signature of person accepting nomination _____