

Petition for Office

Name: _____

Office Sought: _____

Acceptance of Nomination Signature: _____

Please attach a short biography

	Signature	Printed Name	Date	Unit
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Return forms to VFNHP Office located at 121 Park Avenue, Suite 10, Williston, VT 05495

Phone: 802.657-4040

Fax: 802.871-5946

www.vfnhp.org