



# CITY OF VINCENT

## NOMINATION FORM

I hereby nominate \_\_\_\_\_

for the position of Deputy Mayor.

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

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## ACCEPTANCE OF NOMINATION

Name of nominee: \_\_\_\_\_

I hereby accept the nomination made by: \_\_\_\_\_

for the position of Deputy Mayor.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_