

Smokey Row Home Owners' Association, INC

BOARD OF DIRECTORS NOMINATION FORM

CANDIDATE MUST BE A HOME OWNER AND RESIDENT OF SMOKEY ROW ESTATES AND MUST SIGN THIS FORM CONSENTING TO SERVE AS A DIRECTOR OF THE H.O.A. BOARD IF ELECTED

NAME OF HOMEOWNER NOMINATED: _____

HOME ADDRESS: _____

HOME PHONE: _____ BUSINESS OR CELL PHONE: _____

EMAIL ADDRESS: _____

PROFESSION OR OCCUPATION: _____

CONSENT OF NOMINEE

I, the above named nominee, consent to the nomination, and if elected, agree to serve as a Director of the Board for the Smokey Row Home Owners' Association, Inc.

Signature

Printed Name

RETURN TO SMOKEY ROW HOA BY POSTAL MAIL: **PO BOX 263 BARGERSVILLE, IN 46106**

OR BY EMAIL TO: **HOA@SMOKEYROWESTATES.ORG**