PETITION

_____number of active members _____ date _____ Recorder's initials

INSTRUCTIONS: This petition shall have the signatures of at least 10% of the Active Chapter membership, who are holding Membership Cards paid to date of election or beyond. It must be in the hands of the Recorder or Senior Regent one week before the date of elections. (Recorder, be sure to complete the "daily transmit" to International Headquarters in order to determine how many signatures are needed to reach the 10% requirement).

"We, the undersigned co-workers, in good standing in _____
(Chapter Name)

Chapter No. _____ , Women of the Moose, hereby nominate _____ ,
(Number) (Co-worker)

a co-worker in good standing of said Chapter, who has consented to this Petition for the position of

_____.
(position)

TO BE SIGNED AND DATED BY THOSE MEMBERS SUPPORTING PLACEMENT OF NAMED CO-WORKER ON BALLOT.

(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)
(Printed Name)	(Signature)	(MID #)	(Date)	(Printed Name)	(Signature)	(MID #)	(Date)

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