

**California Library Association
Nomination Form**

I am interested in running for the following office:

- Vice President/President Elect**
- Assembly Member-at -Large**
- Section Specify position: _____**

Signature: _____ Date: _____

Please take a moment to give us your full address information, as requested below. This will help CLA update and verify its current information.

Your Alpha ID membership number: _____

Your Name, Title, and Work Address: Residence Address:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Phone: _____ Phone: _____

Fax: _____ Fax: _____

Email: _____ Email: _____

Preferred Mailing Address: Work _____ Residence _____

Please return this by **April 30** to:

California Library Association
717 20th Street, Suite 200
Sacramento, CA 95811