



**NATIONAL ASSOCIATION OF COUNTY
COLLECTORS, TREASURERS AND FINANCE OFFICERS**

Officer & State Director Candidate Nomination Form

This form provides the Nominations Committee with information on all candidates. A candidate slate will be distributed to NACCTFO members in May (at least 30 days prior to the NACCTFO Annual Conference in July).

Name: _____

Elected Title: _____

Address: _____

Expiration of Term: _____ Email Address: _____

Work Phone: _____ Home / Cell Phone: _____

The Bylaws require a NACCTFO Officer or State Director to have the following:

Current NACCTFO dues paying member?

Yes No Confirmed by Treasurer _____

Active NACCTFO member for at least two years?

Yes No Confirmed by active member _____

Attendance at 2 prior year NACCTFO General Membership Meetings?

When? _____ Where? _____

When? _____ Where? _____

NACCTFO Officer or State Director encouragement or endorsements:

County elected and community service experience. (Limit to 5 lines, list most important first):

NACo service such as Steering or Standing Committees, special task forces, affiliate or caucus organizations, indicating the year(s) of service, and any leadership positions held.

NACCTFO active service such as Officer, State Director, Committee Chair, or committee member, indicating the year(s) served.

Why are you interested in serving as a NACCTFO Officer or State Director?

What do you see as the two most important challenges for the NACCTFO Officers and State Directors to focus upon in the coming year?

Signature of Candidate: _____ Date: _____