2022 Northern Ohio District Conference Ballot Consent Form

| Name: | | |
|---|----------------------------|----------------------|
| Address: | City: | Zip Code: |
| Phone: | Cell: | |
| Email: | | |
| Office nominated for: | | |
| Home congregation: | | |
| Current work in my home congregation (list offices you hold, etc.): | Current district leadershi | p: |
| Past work in my home congregation: | Past district leadership: | |
| | | |
| Personal information (spouse, children, vocation, v | rolunteer work, etc.): | |
| Denominational, ecumenical or community work: | | |
| Yes, I have prayerfully considered the reque the office listed above and agree to have my name | | ed in nomination for |
| Signature | Date | |

Please send or email this form, ALONG WITH A CURRENT (DIGITAL) PHOTOGRAPH of yourself within 15 days of receipt to:

Northern Ohio District Church of the Brethren Attn: Julie Watson 1107 E. Main Street Ashland, OH 44805 julie@nohcob.org