

**INDIANA-KENTUCKY SYNOD
2005 NOMINATION FORM**

ELECTED POSITION: Vice President Synod

NAME: _____
Print or Type Full Name

ADDRESS: _____
Street Address

_____ City State Zip Code

PHONE: _____ Home Work

_____ FAX E-mail Address

INFORMATION ON NOMINEE (PLEASE DO NOT ABBREVIATE):

Occupation: _____

Congregation Membership: _____
Congregation City Conference

CURRENT Congregation Service: _____

CURRENT Community Service: _____

CURRENT Conference/Synod/ELCA Service: _____

List specific gifts or talents you think you would bring to this positions (50 words maximum)

Nomination submitted by: _____ **Phone:** _____

If submitted by other than the nominee, has nominee agree to serve? Yes _____ No _____

Due Date: April 1, 2005

Send to: Barb Limbach
2707 Sweet Cider Road
Fort Wayne, IN 46818
Contact: balimbach@hotmail.com