

CANDIDATE INFORMATION SHEET

Name: _____ Local Union # _____
[Please print name as it is to appear on ballot]

- Check one of the boxes below, if applicable:
- GCC
 - BMW Division of IBT Rail Conference
 - BLET Division of IBT Rail Conference

Social Security # _____ Home Phone: _____

Business Phone: _____ FAX: _____

Address: _____

Address is: Home Business

CANDIDATE IS RUNNING FOR: DELEGATE ALTERNATE

Nominator: _____
Address: _____

Phone: _____ Home Business
Social Security # _____

Secunder: _____
Address: _____

Phone: _____ Home Business
Social Security # _____

Nominator: _____
Address: _____

Phone: _____ Home Business
Social Security # _____

Secunder: _____
Address: _____

Phone: _____ Home Business
Social Security # _____