



**NOMINATION TO THE BOARD OF DIRECTORS OF THE
SOUTHEAST TEXAS REGIONAL ADVISORY COUNCIL**

I, _____ hereby nominate

_____ to the SETRAC Board of Directors

for the three-year term/ remainder of a three-year term of office as the representative for
the medical organization known as _____ ,

effective this date _____ , 20_____.

Signed: _____

Please provide mailing address and phone numbers where nominee can be reached, or a résumé.