

Secular Franciscan Order
Fr. Solanus Casey Region

NOTICE OF FRATERNITY ELECTIONS

Name of Fraternity and Location

The above-named fraternity will conduct a Chapter of Elections on : _____
(date)

to be held at: _____
(place)

(street address)

(city and state)

We, hereby, request that the Region provide a Presider to conduct the elections, and a Friar Witness. The Fraternity Council has appointed a nominating committee. To confirm the above date, and for further information, please contact:

Name: _____

Address: _____

Phone: _____

Email: _____

Send this form to the Regional Office for action.