

NOMINATION FORM

Please return this form to DCAD before October 15, 2015. Reminder....your jurisdiction may nominate up to five candidates to the Denton Central Appraisal District Board of Directors.

Please include the address and phone number of your nominees.

Name of your jurisdiction: _____

Name of nominee:

Name _____

Address _____

City _____ Zip _____

Phone # (____) ____ - ____

Return this form to:

Kathy Williams
Denton Central Appraisal District
P.O. Box 2816
Denton, TX 76202