



Officer or Director-at-Large
THIS NOMINATING PETITION MUST BE RECEIVED
NO LATER THAN 5:00PM ON AUGUST 30, 2024

Name:	
Address:	
City, State, Zip:	
Department:	Work City:
Classification/Title:	
Work Phone:	Home Phone:
Signature:	Date:

Any CASE Member as defined in Section 3.02(a) of the CASE Bylaws may declare candidacy for an Officer or Director-at-Large seat. If a candidate chooses to run for both an Officer and a Director-at-Large seat, a separate petition must be submitted for each office sought. See CASE Bylaws Section 3.14(b,d).

Nominating petitions must be signed by at least five (5) CASE Members, as defined in Section 3.02(a) of the CASE Bylaws, who support your candidacy. It is the individual candidate’s responsibility to confirm with the CASE office that the people signing this petition are CASE Members. Non-Members who sign the petition will not be accepted, and a CASE member who submits a petition with the signatures of less than five active CASE Members will not qualify as a candidate. No exceptions will be made to this policy.

Due to the prevalence of telework amongst our members, CASE has suspended the requirement for original nominating petitions. As such, electronic signatures will be permitted.

CASE is accepting Nominating Petitions via our online petition submission portal:

bit.ly/casenominatingpetition2024

If you have trouble accessing the submission portal, please email elections@calattorneys.org

2024 CASE ELECTION NOMINATING PETITION

We, the undersigned Members of California Attorneys, Administrative Law Judges and Hearing Officers in State Employment (CASE), hereby nominate the following candidate for election to the CASE Board of Directors:

Candidate's Name: _____

POSITION SOUGHT: (Officer or Director-at-Large). If seeking an officer position, please specify the title of the position sought (e.g., President, Vice President, Treasurer or Secretary):

Candidates must use separate nominating petitions if running for both Officer and Director seats.

1. Name:	Work Address:
Dept/Class:	City, State, Zip:
E-Mail:	Phone:
Signature:	Date:

2. Name:	Work Address:
Dept/Class:	City, State, Zip:
E-Mail:	Phone:
Signature:	Date:

3. Name:	Work Address:
Dept/Class:	City, State, Zip:
E-Mail:	Phone:
Signature:	Date:

4. Name:	Work Address:
Dept/Class:	City, State, Zip:
E-Mail:	Phone:
Signature:	Date:

5. Name:	Work Address:
Dept/Class:	City, State, Zip:
E-Mail:	Phone:
Signature:	Date: