



**Flemington Community Partnership  
Board of Trustees  
Nomination Form**

Name:

Address:

Email:

Phone:

I am a Flemington Borough (check all that apply):

- Resident
- Business Owner
- Commercial Property Owner

**I would like to nominate the following individual(s) for a seat on the Flemington Community Partnership's Board of Trustees.**

Name:

My nominee is a Flemington Borough (check all that apply):

- Resident
- Business Owner
- Commercial Property Owner

Additional Comments, including name of business (if applicable) of your nominee:

**MAIL YOUR COMPLETED FORM NO LATER THAN OCTOBER 15TH, 2019 TO:**

Dr. Paul Marciano, Chair  
Governance and Nominating Committee  
Flemington Community Partnership  
PO Box 213  
Flemington, NJ 08822