

**RECOMMENDATIONS TO
MICHIGAN GENERAL ASSEMBLY ELECTION PROCESS
(Resource Pool Of Gifted And Interested Candidates)**

Date _____

Name of Person Submitting Recommendations _____

Name: _____

Address: _____

City/State/Zip: _____

Telephone/Email: _____

I recommend this person for _____ Ministry/Committee
Gifts/Abilities/Comments _____

.....

Name: _____

Address: _____

City/State/Zip: _____

Telephone/Email: _____

I recommend this person for _____ Ministry/Committee
Gifts/Abilities/Comments _____

.....

Name: _____

Address: _____

City/State/Zip: _____

Telephone/Email: _____

I recommend this person for _____ Ministry/Committee
Gifts/Abilities/Comments _____
