

**STS. MARY AND JOHN PARISH**  
**PARISH PASTORAL COUNCIL NOMINATION FORM**

NAME OF NOMINEE \_\_\_\_\_

WHY DO YOU THINK THIS PERSON WOULD BE A GOOD CHOICE?

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I HAVE GAINED THE NOMINEE'S CONSENT TO SUBMIT THEIR NAME \_\_\_ YES \_\_\_ NO

NOMINATED BY \_\_\_\_\_ DATE \_\_\_\_\_

*Drop forms into the stewardship basket at Mass or return to the parish office,  
613 Cherry St. Evansville, IN 47713 by Monday, August 20.*

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