



<b>Name:</b>
<b>Address:</b>
<b>City:</b> <b>State:</b> <b>Zip:</b>
<b>Phone:</b>
<b>Email:</b>
<b>MMOTA Chapter:</b>
<b>Office for which Resume is Submitted:</b>
<b>Chairmanship for which resume is submitted:</b>

**QUALIFICATIONS**

**State Offices & Committee Positions Held:**


**Chapter Offices Held:**


**Chapter Committees:**


**Special Skills or Training that would qualify you for this office or chairmanship:**


**MAIL COMPETED APPLICATION TO:**  
MMOTA STATE PARLIAMENTARIAN, BERNIE GANINO  
16 OAKRIDGE DR.  
SAUGUS, MA 01906  
**MUST BE RECEIVED NO LATER THAN MARCH 11<sup>TH</sup>, 2020**