

**CIRCUIT VISITOR
OFFICIAL NOMINATING BALLOT
LCMS Northern Illinois District**

Congregation (Name & location):

Date of Nomination:

Circuit _____

Signed: _____
(Chairman of the Congregation)

(Print Name): _____

(Secretary of the Congregation)

(Print Name): _____

Circuit Visitor (A pastor on the roster of Synod; who is serving a congregation or is emeritus)

NAME: _____

ADDRESS: _____

Circuit Visitor (A pastor on the roster of Synod; who is serving a congregation or is emeritus)

NAME: _____

ADDRESS: _____

Nominating Ballot must be sent to your current Circuit Visitor

PRIOR TO

the day of the Circuit Forum

at which the election shall take place. (Handbook 5.2.2.b)