



CIRCUIT COUNSELOR
OFFICIAL NOMINATING BALLOT
The Eastern District-LCMS

Congregation (name & location): _____

Circuit _____

Date of Nomination: _____

Signed: _____

(Chairman of the Congregation)

(Print Name): _____

(Secretary of the Congregation)

(Print Name): _____

Circuit Counselor

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

NAME: _____

ADDRESS: _____

Circuit Counselor

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

NAME: _____

ADDRESS: _____

Circuit Counselor

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

NAME: _____

ADDRESS: _____

Note: If more are nominated, please use the back side.

**Ballot must be postmarked on or before November 30, 2011
and sent to your current Circuit Counselor.**