

PEACE PLANTATION I HOMEOWNERS ASSOCIATION, INC.

(T/A CASCADES PARK / TALL OAKS)

C/o SFMC, Inc.
9464 Innovation Drive
Manassas, VA 20110
(703) 392-6006 x223 Office, (703) 392-5039 Fax
Community Manager – Larry Gilbert (lgilbert@sfmtcinc.com)
www.cascadespark.com

CALL FOR NOMINATION

August 10, 2020

Dear Cascades Park Homeowner:

The Annual Meeting of the membership is scheduled for Monday, September 14, 2020. The purpose of the Annual Meeting will be to elect two (2) members to the Board of Directors for a three (3) year term.

Should you desire to serve on the Board of Directors, please complete the attached Nomination Petition and return to the address listed below by Monday, August 31, 2020. **In order to be included on the printed ballot, your candidate statement must be received by this date.**

Please mail, email, or fax your candidate statement to:

Cascades Park Homeowners Association, Inc.
C/o SFMC, Inc.
9464 Innovation Drive
Manassas, VA 20110
lgilbert@sfmtcinc.com

Statements that are received by the due date will be copied and attached to the Annual Meeting notice and mailed to all owners of record approximately twelve (12) days prior to the meeting. Should you have any questions concerning the Annual Meeting, please do not hesitate to contact me at (703) 392-6006 x223 or via email at lgilbert@sfmtcinc.com.

Sincerely,

Larry Gilbert
Community Manager

NOMINATING PETITION FOR BOARD OF DIRECTORS ELECTIONS

(PLEASE PRINT LEGIBLY)

I am willing to serve on the Cascades Park Homeowners Association Board of Directors. Please consider me for a vacant position on the Board. I have obtained the signatures of three (3) Cascades Park homeowners in support of my nomination (See below).

Full Name: _____ Phone: _____

Street Address: _____

Nominee Signature (Required) _____ Date

Qualifications: *(Pertinent Biographical Information)*

I hereby support the nomination of the above listed homeowner for a position on the Board of Directors of the Cascades Park Homeowners Association.

Nominee Name: _____

CP Homeowner Name: _____

Street Address: _____

Signature (Required) _____ Date

Nominee Name: _____

CP Homeowner Name: _____

Street Address: _____

Signature (Required) _____ Date

Nominee Name: _____

CP Homeowner Name: _____

Street Address: _____

Signature (Required) _____ Date