

EOL WATER SUPPLY CORPORATION
9645 ELK ROAD
AXTELL, TEXAS 76624
(254)863-0404

Dear Member,

On April 21, 2020 we will hold our Annual Meeting. This is the time of year when we elect or reelect directors for our Board. If you are interested in becoming a Director please fill in the application below and return it to our office no later than March 6, 2020. If you have any questions regarding the responsibilities and duties of Board Members, please contact Mike Dulock at (254) 717-7377. We look forward to hearing from you.

APPLICATION FOR BOARD OF DIRECTOR'S POSITION

This application form must be completed and submitted to the Corporation's office by March 6, 2020 for the applicant's name to be placed on the ballot.

Biographical Information

*Applicant's Name: _____

Mailing Address: _____

Physical Address (if different than mailing address): _____

Phone #: _____

*Water System Member Since: _____

Qualifications

*Previous Board of Director Experience: _____

*Business/Government Experience: _____

*Education: _____

***Personal Statement** (100-word limit):

***This information will be printed on the ballot and sent to all members.**

Affirmation and Pledge to Serve:

I, _____ will be at least 18 years of age on the first day of the director term; am a member of the Corporation; have not been determined by a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote; and have not been finally convicted of a felony.

I have reviewed the Corporation's bylaws and certificate of formation and I meet the qualifications set forth therein.

If elected, I pledge to serve in a director position on the Corporation's Board of Directors; and will do my best to attend all meetings, regular or called, as designated by the board.

Under penalties of perjury, I declare that I have reviewed the information presented in this Application, including accompanying documents, and to the best of my knowledge and belief, the information is true, correct and complete.

Signature of Applicant _____ Date _____