

DISTRICT YOUNG WOMAN REPRESENTATIVE NOMINEE

Lutheran Women's Missionary League Texas District

COMMENT FORM

(to be completed by Society President or Pastor of Nominee's Congregation)

NAME OF NOMINEE _____

MAILING ADDRESS _____

CITY _____ ZIP CODE _____

PHONE home (____) _____ cell (____) _____ work (____) _____

HOME CONGREGATION _____ CITY _____

LWML SOCIETY _____

LWML ZONE _____

I feel that the above named individual would make a good "Young Woman Representative" of the Lutheran Women's Missionary League Texas District because:

Form submitted by:

LWML Society President of Nominee's Congregation

OR

Pastor of Nominee's Congregation

This "Comment Form" is to be sent to the Chairman of the District Committee on Young Women by DECEMBER 15 of even-numbered years.