

## NOMINATION APPLICATION PINECREST PROPERTY OWNER'S ASSOCIATION BOARD OF DIRECTORS

I	, hereby wish to submit my name for a position	
	Property Owners' Association. I am a resident of Pinecres	
	I understand the Board of Directors meets monthly a	
will attend all meetings except for ill	ness or personal emergencies.	
Address	How long?	
Email address:	Contact telephone:	
(Optional)	(Optional)	
Family information:		
Work experience/education:		
-		
Social/community involvement:		
,		
	<del></del>	
Why are you interested in serving?		
j j		
	-	
Have you served on any previous Pine	ecrest (or other POA) committee? Tell the membership ab	

Your thoughts on what you believe to be the three (3) most important issues facing Pinecrest today and how, in your opinion, they should be addressed:		
	-	
Closing thoughts:		
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Signed:		
Date:/		

**NOTE:** Applications will only be accepted using this form. Please no attachments. The application MUST be received by the Election Committee **no later than October 31, 2025,** to be included with the notice of the annual meeting and be eligible to participate in the Meet the Candidates Night.

## Please return to:

Pinecrest, POA % Trista DiNovo, CMCA®, AMS® 2 Corpus Christi #302 Hilton Head Island SC 29928 or by fax: 843-785-3901

or by email:

Cathy@IMCHHI.com