HORIZONS-MARINA DISTRICT OWNERS ASSOCIATION

Board of Directors Candidate Statement Please return this form no later than FRIDAY, SEPTEMBER 14, 2018 by 5:00 P.M.

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Name:		
Address:		
	Email Address:	
Employer:		
Occupation:		
I believe that all my stateme	ts herein and in my attached Candidate Statement are true.	
	f the Horizons-Marina District Owners Association. My y registered with the Association as such.	y name
scheduled Board meetings a	wo (2) year term of office and attendance is required at read at occasional special meetings. I agree to adhere to and end the Association as set forth in the CC&Rs, Bylaws, and Rule	enforce
Candidate's Signature	Date	×

The information you provide on the form below will be copied for use on all election materials and Owner mailings. You may also include a photo not to exceed 1" x 1" on your statement, which must be typed. Your candidate statement may be emailed to the Manager Assistant at cjames@actionlife.com.

Only your Candidate Statement will be sent to Homeowners. Please limit it to 300 words.

DEADLINE TO RETURN: 5:00 P.M. – Friday, September 14, 2018 ANNUAL MEETING DATE: 6:00 P.M. – Thursday, October 25, 2018

MAIL OR FAX TO: Horizons-Marina District Owners Association

c/o Action Property Management, Inc. 555 Front Street San Diego, CA 92101 (619) 338-4096; (619) 231-9736 Facsimile

(OVER - COMPLETE REVERSE SIDE)



CANDIDATE STATEMENT

Name:		
Address:		
A. Your goals and objectives as a member of the Board of Directors:		
B. Community Association Experience:		
C. Relevant Work Experience:		
D. Civic/Volunteer Organizations and Positions Held:		
E. Why should you be (re)elected to the Horizons Board of Directors?		
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Should you have any questions about completing this Statement, please contact General Manager Monique Douglas or Manager Assistant Charles James at (619) 338-4096.