

Name of organization:

Board of Directors Roster – Nonprofit Solar Project

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| **NAME** | **OCCUPATION** | **RESIDENCE ZIP CODE** | **TENURE** **(dates on board or number of years)** | **OFFICE** **(if any)** |
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How many Board Members are allowed per your By-Laws? How often does your Board meet?

Where does your Board meet?

Helpful hints:

* Names are easier to read if presented in alphabetical order.
* Occupation: Please share the job title and business name for each individual. If someone is retired, indicate that but tell us what they retired from. Add lines as needed.