

**NOMINATION FORM
PARTICULARS OF THE CANDIDATE**

PF. NO _____

NAME OF CANDIDATE: _____

ID CARD NO _____

NOTE:

- 1. The Actual Nomination Form should be collected from the Secretariat**
- 2. The duly completed Nomination Form (i.e. signed by at least 100 qualified members in support of the interested candidate) must be returned to the Election Board on or before 20th April 2016**

No	PF. NO	NAME OF MEMBER	SIGNATURE
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I declare that the information provided above is true and accurate to the best of my knowledge

CANDIDATES NAME _____

CANDIDATES SIGNATURE _____

DATE _____