

Tamworth Broadcasting Society Inc. Annual General Meeting 2019 Nomination Form

l ,(full name)	of	(address)	,
and I,(full name)	of	(address)	,
both being members of the Tamworth Broadd	casting Sc	ciety Inc., would like to nomina	ate
(full name)	of	(address)	,
, ,		, ,	
member of the Tamworth Broadcasting Soc committee of this Society, in the following cap			member on the
President		Committee Member	
Vice President		Secretary	
Treasurer			
(Signature of nominating member 1)		Date	
(Signature of nominating member 2)		Date	
Please state in a few words why you are nom	ninating th	is member:	
Consent of Nominated Member			
l ,(full name)	of	(address)	,
agree to be nominated for the above position	(s).		
(Signature of nominated member)		Date	

NB: Written nominations must be received by the office reception by close of normal business hours on Wednesday, 2nd October 2019.

Tamworth Broadcasting Society Inc.

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