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## NOMINATION FORM

l,		, S/o / W/o	
hereby file my nomination for		the post of	for the term 2023-2025.
My n	nembership number is	I confirm that I am not in arrears of any dues.	
			SIGNATURE
Cont	act details of the conte	stant:	
Nam	e:		
<u>PRO</u>	<u>POSER</u>		
1.	Name:		
	Address:		
	Membership Number:	Signature	
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2.	Name:		
	Address:		
	Membership Number:	Signature	