



NOMINATION FORM FOR ELECTION TO THE SUPERVISORY COMMITTEE

THIS NOMINATION FORM MUST BE COMPLETED IN A FULL, ACCURATE AND LEGIBLE MANNER

In accordance with **By-Law 36** of the Barbados Public Workers' Co-operative Credit Union Limited (the Credit Union), which requires that not less than four existing members of the Credit Union nominate a person proposed for election to the Supervisory Committee of the Credit Union, we the undersigned hereby nominate:

<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MS. LAST NAME:	
FIRST NAME:	MIDDLE NAME(S):
PERMANENT ADDRESS: STREET/AVENUE:	
CITY/TOWN:	PARISH/STATE:
ZIP/POSTAL CODE:	COUNTRY:

HOLDING CREDIT UNION ACCOUNT NOas a candidate for election to the Supervisory Committee at the upcoming election to be held during the Annual General Meeting of members of the Credit Union on Saturday, July 24th, 2021 commencing at 10.00 a.m.

	NAME	CONTACT NO.	ACCOUNT NO.	SIGNATURE
1.				
2.				
3.				
4.				

DECLARATION OF CANDIDATE

I..... have given my consent to the above noted nomination and confirm my willingness to serve on the Supervisory Committee as prescribed by the By-Laws of the Credit Union if elected.

In accordance with **By-Laws 34 and 35**, I confirm that I am a citizen or resident of Barbados, I hold twenty-four (24) qualifying shares and I have been a member of the Credit Union for at least six (6) months. I have carefully read the candidate guidelines provided to me by the Credit Union before my acceptance of this nomination and have fully understood them.

SIGNATURE OF NOMINEE:	DATE (mm/dd/yyyy):
Name of Secretary, Board of Directors: (PRINT)	
Signature of Secretary, Board of Directors	Date Received

This form must be returned in a sealed envelope addressed to the Credentials Committee, Barbados Public Workers' Co-operative Credit Union Ltd., **Clarence Greenidge House, Keith Bourne Complex, Belmont Road, St. Michael** no later than **4:00 p.m. on Friday, June 18th, 2021.**