

**NOMINATION FORM  
KALAMUNDA CHAMBER OF COMMERCE INC  
EXECUTIVE COMMITTEE 2010/11**

We wish to nominate

\_\_\_\_\_

For a position on the Kalamunda Chamber of Commerce Executive Committee

**Proposer** NAME \_\_\_\_\_

ORGANISATION \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**Seconder** NAME \_\_\_\_\_

ORGANISATION \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**I agree to this nomination**

NAME \_\_\_\_\_

ORGANISATION \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PLEASE PRINT CLEARLY AND RETURN FORM TO:

Kalamunda Chamber of Commerce Inc , PO Box 417, KALAMUNDA WA 6926  
Email: [lisa@kalamundachamber.com](mailto:lisa@kalamundachamber.com)

BY: 1700 hours on Monday 22 November 2010

***NB. Proposer, Seconder and Nominee must be financial members of Kalamunda Chamber of Commerce Inc.***