2023 NOMINATION FORM KALAMUNDA CHAMBER OF COMMERCE INC COMMITTEE MEMBER NOMINATION

I wish to nominate for el	ection to the Committee:	
NAME		
ENTERPRISE		
ADDRESS		
EMAIL		
PHONE		
For the position of (Chairperson, Deputy C	hairperson, Secretary, Treasurer, Ordinary Committee Member)	
Signed by Nominee		
The Chamber Rules state from another member or	te that nominations to the Committee must be supported for the Chamber:	ed by a statement
I support the nomination	n of	
for the position of		
NAME		
BUSINESS		
Signed by Supporter		

PLEASE PRINT CLEARLY AND RETURN FORM TO:

Kalamunda Chamber of Commerce Inc , 50 Railway Rd KALAMUNDA WA 6926 Or Email to: manager@kalamundachamber.com

By no later than: 1700 hours on Wednesday 15 November 2023

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