

Serving those who serve for us



ANSAC
CREDIT UNION Ltd.

NOMINATION FORM – DIRECTOR

We, the undersigned, put forward the below-mentioned nominee for Director of ANSAC Credit Union Ltd.

Name of Nominee

(Block Capitals)

**Home address of
Nominee**

Signed Proposer

Proposer's membership no.

Signed Seconder

Seconder's membership no.

Consent of Nominee: I _____ as a member hereby agree to be nominated as a candidate for vacancies on the Board of directors of ANSAC Credit Union Ltd.

Signed

Date

Membership no. of nominee

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NOMINATION FORM – BOARD OVERSIGHT COMMITTEE

We, the undersigned, put forward the below-mentioned nominee for Board Oversight of ANSAC Credit Union Ltd.

Name of nominee

(Block Capitals)

Home Address of nominee

Signed Proposer: _____

Proposer's membership no. _____

Signed Secunder: _____

Secunder's membership no. _____

Consent of Nominee: I _____ as a member hereby agree to be nominated as a candidate for vacancies on the Board Oversight Committee

Signed _____ **Date** _____

Membership no. of Nominee _____