



Energy Innovation Co-operative Ltd

Nomination form - Director

PROPOSER

I, _____ (Name in full)

Of _____ (Address in full)

Being a financial member of Energy Innovation Co-operative Ltd Yes/ No **(circle as appropriate)**

hereby nominate _____ for a position of Director,
Energy Innovation Co-operative Ltd.

Signed proposer

SECONDER

I, _____ (Name in full)

Of _____ (Address in full)

Being a financial member of Energy Innovation Co-operative Ltd Yes/No **(circle as appropriate)**

Signed seconder

ACCEPTANCE OF NOMINATION

I, _____ Name in full

Former names
(if any)

Of _____ (Private address
in full)

Daytime Phone _____ Email address _____

Being a financial member of Energy Innovation Co-operative Ltd Yes/ No **(circle appropriate)**

Date of birth* _____ Place of birth* _____

Hereby accept nomination for a position of Director, Energy Innovation Co-operative Ltd

Signed

Date

* The Register of Co-Operatives, Consumer Affairs Victoria requires notification of Directors' name, private address & date and place of birth.

