

# Notification of changes / confirmation of the members of the Committee of Management of a Co-operative Society

To the Co-operatives Board

This form must be filled-in in BLOCK LETTERS

Name of Co-operative \_\_\_\_\_

hereby gives notice in accordance with Article 10 of the Co-operatives Societies Act XXX of 2001 that the new Committee of Management is composed as follows:

President \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Member \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Vice-President \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Member \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Secretary \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Member \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Treasurer \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Member \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Member \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Member \_\_\_\_\_  
(Name and Surname)  
ID Card \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Effective Date of Change \_\_\_\_\_

Date today \_\_\_\_\_

Signature \_\_\_\_\_

Note: It is important that any changes in the Committee of Management during the year should immediately be notified to the Co-operatives Board using this form.

Name and Surname \_\_\_\_\_

Position \_\_\_\_\_

ID Card \_\_\_\_\_