



# CO-OPERATIVE BANK REGULATED NON-WDT SAVINGS AND CREDIT SOCIETY LTD

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## **PROXY NOMINATION FORM**

I, (Delegate's Full Name) \_\_\_\_\_, hereby nominate  
(Proxy's Full Name) \_\_\_\_\_, Member Number  
\_\_\_\_\_, to attend the meeting on behalf of the (Branch  /  
Department  ) \_\_\_\_\_, scheduled for  
(Date) at \_\_\_\_\_ (Venue).

Note: The nominated proxy shall have no authority to vote, but may participate and make contributions on behalf of the represented Branch/Department.

### Delegate Details

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Team Leader Approval

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Stamp