



THE FIDUCIARY INSTITUTE OF SOUTHERN AFRICA



NOMINATION FORM
NATIONALLY ELECTED COUNCILLORS
(One (1) position - see clauses 8 & 15 of the FISA Constitution)

We, the undersigned, hereby nominate _____
(full names)
for a position as a councillor of the Fiduciary Institute of Southern Africa.

Name of 1 st proposer: _____	Signature: _____
Date: _____	Tel no: _____
Name of 2 nd proposer: _____	Signature: _____
Date: _____	Tel no: _____

Signature of nominated member consenting to this nomination: _____	
Date: _____	Tel no: _____

***Please forward the completed nomination form by email to louis@fisa.net.za
or by fax to 086 672 2054 on or before
WEDNESDAY 3 February 2021***