



The Light & Power Employees Co-operative Credit Union Ltd.

Business Complex, Bush Hill the Garrison, St. Michael, Barbados

TEL: (246) 431-1400 | EMAIL: lp.creditunion@caribsurf.com

CONSENT TO SERVE AS AN OFFICER

I, _____, ID # _____ of
Name (Please print)

_____, hereby
Address (Please print)

advise of my consent to be nominated in the capacity indicated below, to stand for election at the **Annual General Meeting**, and if elected to serve as an officer of The Light & Power Employees Co-operative Credit Union Limited as follows:

Nominee for Election As An Officer To:		
<input type="checkbox"/> Board of Directors	<input type="checkbox"/> Credit Committee	<input type="checkbox"/> Supervisory Committee

In accordance with Section 57 of The Co-operative Societies ACT CAP 378A, I attest to the following:

(Please read and tick all that apply)

- I am over 18 years of age
- I am a citizen and resident of Barbados
- I hold the minimum value of qualifying shares in accordance with the By-laws
- I have been a member of the Credit Union in excess of one year
- I have never been sentenced by a court in any country for an offence involving fraud or dishonesty, nor have I been declared bankrupt, or made any post-contract arrangement with my creditors
- I am in good financial standing with this and any other registered society of which I am a member
- I have never been a director of a failed Credit Union
- I have not been convicted on indictment of an offence in connection with the promotion, formation or management of a body corporate, or of an offence under The Co-operative Societies ACT.
- I have never been found to be of unsound mind by a Court in Barbados
- I am not an employee of the Credit Union, or of the FSC, or a partner or employee of the Society's auditor or of the Barbados Co-operative and Credit Union League Ltd.
- I am not already part of the management of another Credit Union

Signature

Date:

Proposer:
Name (Please print)

Seconder:
Name (Please print)

Signature:

Signature:.....

Date:.....

Date:.....

(Completed form must be returned to the Credit Union by 4:00 PM, 28 February 2023)

Date Received:	Received by:..... Name (Please print) Signature
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