



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 2024)

Date Received:	Received by:..... Name (Please print) Signature
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

OFFICIAL USE ONLY	
Documents submitted:	
<input type="checkbox"/> Fit & Proper Questionnaire	<input type="checkbox"/> Résumé
<input type="checkbox"/> Police Certificate of Character	<input type="checkbox"/> Certified copy of Passport picture page

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