## बिहार राज्य मत्स्यजीवी सहकारी संघ लि०

## COOPERATIVE FISHERIES FEDERATION (COFFED)

Performa for Nomination of Delegate to the Special General Body of COFFED

- 1. Name of the Society/ समिति का नाम :
- 2. Address of the Society/ समिति का पता :
- 3. Name & Address of the Delegates/ प्रतिनिधि का नाम एवं पता :

Name of Delegate/ प्रतिनिधि का नाम	Designation (Chairman/Chief Executive/Secretary/Director/M ember/ Administrator held by the delegate पद (अध्यक्ष / मुख्य कार्यपालक / मंत्री / सचिव / निदेशक / सदस्य / प्रतिनिधि द्वारा नियुक्त प्रशासक	Address of the Delegate प्रतिनिधि का पता	Specimen Signature of the Delegate duly attested (with Photograph) अभिप्रमाणित फोटो संहित प्रतिनिधि का हस्ताक्षर
			Photo
			Signature
			(Name & Designation of the Person attesting the Signature)

 Nominated vide resolution No...... dated ...... dated ...... (Name of the Nominating body i.e. General Body/Board of Director's/Executive Committee/others etc.)

Seal / मोहर :

Date/ दिनांक :

Signature of the Chairman/Chief Executive Officer/Secretary/Director/Administrator of the Society

Please attached certified copy of the fresh resolution.

\\PC-33\Drive-D\File-A\A-130\2024\Delegate Format.