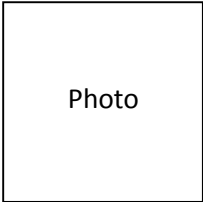


Pakistan Mediators Association

NOMINATION FORM



For the post of _____

Of the _____ for the year _____

PARTICULARS OF THE CANDIDATE

Full Name _____

Office Address _____

Telephone No. _____

Membership No. _____

PARTICULARS OF THE PROPOSER

Full Name _____

Office Address _____

Telephone No. _____

Membership No. _____

PARTICULARS OF THE SECONDAR

Full Name _____

Office Address _____

Telephone No. _____

Membership No. _____

We the undersigned Propose / Second the above proposal.

Signature of Proposer

Signature of Seconded

Signature of Candidate

Note: The form should be completed and duly signed and nomination fee enclosed