

Shwetdhara Milk Producer Company Limited (Formerly known as Shwetdhara Mahila Milk Producer Company Limited)

Nomination Form

PART I:

Form for nomination for the vacant position on the Board of the Shwetdhara Milk Producer Company Limited

With reference to the Notice (Ref No. _____ dated _____)

inviting nomination from eligible members for consideration by the 'Nominating Committee' for the vacancy of the Producer Director (for Class _____ position) on the Board of the Shwetdhara Milk Producer Company Limited, we hereby nominate the following person as a candidate for election/appointment as Director on the Board of the Company.

Candidate's Name:
Father's / Mother's / Husband's Name:
Milk Producer Member Code:
Folio No. :
Postal address:
Shwetdhara

She is a "Member" of Shwetdhara Milk Producer Company since ______ and remained in Class _____ of member category for the past _____ years. She is qualified to be a candidate for the appointment as the Board of Director for the class _____ position on the Board as per the notification given by the Company and/or as per the provisions of the Articles of the Company.

We declare that we are the "Members" of class _____ of the Company eligible to vote in the Annual General Meeting of the Company. Our name(s) and Member codes as per the records of the Company are mentioned in the table given below and we append our signatures below in token of subscribing to this nomination.



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Particulars of the Proposers and their signatures

S1. No	Name of the Member	Member Class category	Folio No.	Member Code	Eligible to vote (Yes/No)	Signature
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.				A		
9.				E .		
10.						
11.			Y			
12.			X			
13.						
14.						
15.						
16.		bnv	vei	canar	a	
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						

(at least 25 members of the same class to propose)

REGISTERED OFFICE: GORAKHNATH COMPLEX, FIRST FLOOR LEFT SIDE, PRAYAGRAJ ROAD, NEAR AWADH UNIVERSITY, FAIZABAD, AYODHYA-224001 CIN: U01100UP2016PTC082671 EMAIL: Info@shwetdharamilk.com, Ph no: 7991402222



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Self-declaration by the Candidate

I,, D/o or W/o of	, R/o
	the

candidate, mentioned in Part I, assent to this nomination and hereby declare that:-

- i. My name and my father's / mother's / husband's name have been correctly spelt out above in ______ (Proof______ attested).
- ii. My Member code is ______, Folio No. ______ and I am a member since ______ and remain in Class _____ for the last ____years.
- iii. I have completed _____ of age (Proof ------ enclosed).
- iv. I have completed ______ (educational qualification) (Proof -----enclosed).
- v. I have supplied all the surplus milk produced in our household to the Company and not supplied milk to any other players/competitors/operators.
- vi. I have supplied a total quantity of _____ Ltr of milk for _____ number of days during the previous financial year and I have subscribed for _____ number of shares of the MPC.

I further declare that to the best of my knowledge and belief, I am qualified and does not related to any person having any business transaction with the company (like transporter, franchisee/contractor, employee of the MPC etc.,) and does not attract any disqualification as per the provisions of The Companies Act and Articles of Association of the Company.

I understand that if any of the information provided above by me found incorrect then my candidature shall be liable to be rejected by the Company.

Date _____

(Signature of Candidate)



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PART II To be filled by the Company Secretary for office records

Serial No. of nomination form:							
Kum. / Smt	having member code	and Folio					
No This N	Nomination was delivered to the Compar	ny Secretary at the					
Milk Producer Company Limited registered office at (hour) on							
(date) by the *candidate / proposer(s) via by hand/registered post/courier/any other electronic							
means.							
Date	Signature of the Company Secreta	ry					
* Strike out which is not applicable							
2							
PART III Ackno	wledgement f <mark>or receipt o</mark> f Nomination l	Form					
(To be handed over to the person presenting the nomination form)							
Serial No. of nomination form:							

All nomination forms will be taken up for scrutiny at ______(hour) on _____(date) at ______(place).

Date _____

Signature of the Company Secretary

* Strike out which is not applicable