

# TE PUKE 2B1C TRUST

## NOMINATION FORM FOR RESPONSIBLE TRUSTEE OF TE PUKE 2B1C TRUST

### ELECTION OF TRUSTEES AT GENERAL MEETING – 12 OCTOBER 2024

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#### NOMINEE (Person being nominated)

I agree to my nomination for the position of Responsible Trustee of Te Puke 2B1C Trust for consideration at the General Meeting of Beneficial Owners to be held on Saturday 12 October 2024, at 10:00 a.m. held Tuhourangi Marae, 429 State Highway 2, Te Puke.

I also agree for my CV and Statement of Experience to be attached to this nomination form. I understand a presentation of no more than five (5) minutes will also be required at the General Meeting.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Nominee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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#### NOMINATOR (Person making this nomination)

I confirm that I am a Beneficial Owner of Te Puke 2B1C Trust. I hereby nominate the person named above as a Responsible Trustee of Te Puke 2B1C Trust for consideration at the General Meeting.

Name: \_\_\_\_\_

Shareholder Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Nominator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE:**

For this nomination form to be accepted, it must be completed and lodged with the Secretary office of Kusabs Lasike Ltd, 1141 Pukaki Street, Po Box 441, Rotorua 3010, **NO LATER THAN 4pm MONDAY 7<sup>th</sup> OCTOBER 2024**. Nominations received after this time and date will be deemed invalid. This nomination form may be lodged by email to [admin@kll.co.nz](mailto:admin@kll.co.nz)

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**CURRICULUM VITAE AND STATEMENT OF EXPERIENCE**

The Nominator, with the agreement of the Nominee, will attach to this nomination form the Nominee's Curriculum Vitae and a Statement of Experience of no more than two (2) pages.