

To: The GATeS Election Committee

Date:

GREATER ATLANTA TELANGANA SOCIETY (GATeS)

Board of Directors Elections 2020

Name First _____ Middle _____ Last _____

Address _____

Email id: _____

Phone Number: _____

Signature: _____

Printed Name: _____ Date _____

Proposed By:

Signature: _____

Printed Name: _____ Date _____ Member Since year _____

Seconded By:

Signature: _____

Printed Name: _____ Date _____ Member Since year _____

Notes: Proposed and Seconded members should be GATES/TCI Life Members.