FORM 2

ELECTION OF OFFICE BEARERS AND MEMBERS OF EXECUTIVE BODY OF GRAPPLING FEDERATION OF INDIA (GFI)

NOMINATION PA	APER FOR			
ELECTION AS				(NAME OF THE
POST)				
Shri Sukhendra Sin	gh			
(Advocate Chandiga	arh High Court			
AOR- Supreme Cou	•			
• •	l as Returning Officer fo			
	s, contact number and	email address is as un	der:-	
Office Address:				
Chamber No. 467-A				
Lawyer's Chamber (
Panipat Court, Hary				
	Email: sukhendra1@gm			
We nominateShi	ri/Smt./Ms			
			Sl. No	in the Electoral
College list for th	ne above mentioned	d post.		
Our particulars a	re given below:-			
	Name of	Name of	SI. No.	Signature
	Candidate	Member	in the	
			electoral	
			College	
Proposer				
Seconder				
	·		•	
I, the candidate	above named, do he	ereby give my assei	nt to my nomination	for the above post.
Name of the Can	didate			
Name of Membe	er State/Union Terri	tory/ Board/ Institu	ution	
Sl. No. in the Ele	ctoral College list	,,		
	<u> </u>			
Signature				
Place:				
Date:				