Nomination Form

We the undersigned would like to nominate the following person as a member of the Board of Directors of the North End Business Improvement Zone.

Name:					
Business :					
Address:					
Phone:		Fax:	Email: _		
173	.1/2002, establishir			s of THE CITY OF WINNIPEG BY- ness Improvement Zones within	
Signature	J.		Date		
All names be	low must be the sig	gnature of the o	wner/manager. Only	one name per business.	
<u>Business</u>		<u>Name (p</u>	olease print)	<u>Signature</u>	
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