|  |  |
| --- | --- |
| ***Name of Organization*** |  |
| ***Type of Organization*** | Selection 1  Selection 2  Selection 3  Selection 4  Selection 5  Selection 6  Selection 7  Selection 8  Selection 9 |
|  |  |
| ***Nominee*** | |
| *Family Name* |  |
| *Last Name* |  |
| *Designation* |  |
| *Street Address & No.* |  |
| *Postal Code, City* |  |
| *Phone Number* |  |
|  |  |
| ***Nominee Alternate*** | |
| *Family Name* |  |
| *Last Name* |  |
| *Designation* |  |
| *Street Address & No.* |  |
| *Postal Code, City* |  |
| *Phone Number* |  |

*I confirm the acceptance of the Council on Ethanol-Based Clean Cooking Governance*

**Date Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**