

NATIONAL INTEGRATED MEDICAL ASSOCIATION

MAHARASHTRA STATE BRANCH 2020-2022

(All India Organisation of Graduates of Integrated Medicine)
Regd. Under Soc. Registration Act of 1860 Reg. No.BOM/282/71-GBBSD, RPT. No.F/2469 Mum

PROFORMA FOR NOTIFYING CHANGE OF OFFICE BEARER & THE MEMBERS OF THE MANAGING COMMITTEE

(To be submitted to the Hon. General Secretary : Dr.Anil M. Bajare, "Mauli", Mudliyar Nagar, Near Moti Nagar Chowk, Amravati-444606)

Name of the NIMA Branch:		Total No. of L.M. :				
Name of the Repor	rting Member:					
Address:						
	Taluka :					
Tenure of Office B	Bearers of The Executive Committee	tee: From 01 Oct. 20	018 to 30 Sep. 2020.			
Date :		Signature of Reporting Member				
Post Name & Addres		ss Other Particulars				
Elected President :		L.M. Ship	No. of NIMAMSB :			
		_ STD Code	:			
		_ Telephone	: (0)			
Taluka :	District :	_	(R)			
Pin Code :		Mobile:_				
Email :						
Elected Secretary :		L.M. Ship	No. of NIMAMSB :			
			:			
		_ Telephone	: (0)			
Taluka :	District :	_	(R)			
Pin Code :		Mobile:_				
Email :						
Elected Treasurer :		L.M. Ship	No. of NIMAMSB :			
		_ STD Code	:			
		_ Telephone	: (0)			
Taluka :	District :	_	(R)			
Pin Code :		Mobile:_				
Email :						

OTHERS:							
(e.g.	Vice President	Jt.Secretary	/ Asst. Sec	eretary / C	Organiser /	/ Managing	Committee
Member) (As per Me	morandum of Ass	c. Part-III/II/S	Sec-2BYE-L	AWs for th	e Dist./Lo	cal Branch o	of Managing
~	W 170 1						

Committee, Every Dist./Local Branch shall have an elected managing committee of atleast 5 (Five) members, 3 Office Bearer, i.e. President, Secretary, Treasurer., Branch More than 100-MC 20 Members incl. 10 Office bearers/2VP/S/2Jt.S./2 Asst.S./Org./Tr)

	y):		Sign
Date of Inward:	For NIMA-M	ISB's Office Use Only	
Sign. Ele. President	Sign. Ele. Secretary	Sign. Imm. Past President	Sign. Imm Past Secretary
Communication (if any):		
Post	Only Name	L.M. Ship No. (NIMA MSB)	Mobile No.