

APPENDIX 2 – Pool Manager Nomination Form

<p><u>MSF office use only</u></p> <p>Date Received:/...../.....</p> <p>Time Received:</p> <p>Received by:</p> <p>Validated by:</p>

Grower’s Name:

GPA Reference Number:

This Pool Manager Nomination Form is provided in accordance with **clause 4** of the GPA.

Nomination of Pool Manager

Nominated Pool Manager	Percentage of Grower’s Cane Pay Sugar to be marketed by Pool Manager	Season(s)
MSF Marketing		
QSL		

.....
Signed by Authorised Person

...../...../.....
Date