Universiti Tunku Abdul Rahman			
Form Title : **SPECIMEN SIGNATURES OF OFFICE BEARERS**			
Form Number : FM-DSA-CSU-007	Rev No: 1	Effective Date: 01/05/2011	Page No: 1 **of** 1

(From ____/____/_____ to ____/____/_____)
(A copy each is to be issued to DSA and Finance, and a copy is retained by the Society)

1) Name of Society/Club: _____ Code _____

2) Signatories

a) The Chairman

Name: _____ Student ID.: _____

Contact No.: _____ I. C. No. _____

b) The Treasurer

Name: _____ Student ID.: _____

Contact No.: _____ I. C. No. _____

c) The Main Advisor

Name: _____ Staff ID.: _____

Contact No.: _____ I. C. No. _____

d) The Co-Advisor

Name: _____ Staff ID.: _____

Contact No.: _____ I. C. No. _____

3) Witness by DSA staff

Name: _____ Stafft ID.: _____

Contact No.: _____ I. C. No. _____

Date: _____