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CEO Forum on Strategic Treasury Management

Date: June 29, 2009 (Monday) (9:00AM-12:00 NOON)

Venue: Tower Inn Hotel, Davao City

PRINTED NAME:

First Name *M.I.* *Surname*

NICKNAME: _____ **BIRTHDAY:** _____

RURAL BANK: _____

RB COMPLETE ADDRESS: _____

RB TEL. NO(S): _____ **RB FAX NO:** _____

E-MAIL ADDRESS: _____ **MOBILE NO** _____

EDUCATIONAL BACKGROUND

	Course/Degree	Institution	Year Graduated
Post Graduate			
College			

WORK EXPERIENCE: (Last 2 including Current Employment)

Company	Inclusive Year(s) of Employment	Position(s) Held

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**PROFITING FROM BETTER BALANCE SHEET MANAGEMENT
(ASSET LIABILITY MANAGEMENT)**

Date: June 30 - July 1, 2009 (Tuesday and Wednesday) (9:00AM-5:00PM)

Venue: Tower Inn Hotel, Davao City

PRINTED NAME:

_____ *First Name* *M.I.* *Surname*
NICKNAME: _____ **BIRTHDAY:** _____

RURAL BANK: _____

RB COMPLETE ADDRESS: _____

RB TEL. NO(S): _____ **RB FAX NO:** _____

E-MAIL ADDRESS: _____ **MOBILE NO** _____

EDUCATIONAL BACKGROUND

	Course/Degree	Institution	Year Graduated
Post Graduate			
College			

WORK EXPERIENCE: (Last 2 including Current Employment)

Company	Inclusive Year(s) of Employment	Position(s) Held

**RURAL BANKERS RESEARCH &
DEVELOPMENT FOUNDATION, INC.**

NOMINATION FORM

	PROFITING FROM BETTER BALANCE SHEET MANAGEMENT (ASSET LIABILITY MANAGEMENT)		June 30- July 1, 2009		9:00 AM to 5:00 PM
	Tower Inn Hotel, Davao City				

To be completed by the employer/nominating agency/project leader

1. Employing office institution

2. Postal address of employing office/institution

3. Phone no/s. _____

4. Facsimile no/s. _____

5. E-mail Address: _____

6. Name/s and exact position/s held by nominee/s

Name	Position
1.	
2.	
3.	

Date

Signature Over Printed Name/
Position/President/Personnel Manager