

**STAKEHOLDER SUBMISSION FORM**

*\*Please complete this form whether you are responding as an individual or on behalf of an organization. Where not applicable, please insert N/A.*

**INDIVIDUAL'S INFORMATION**

NAME	
ADDRESS	
CONTACT NOS.	
EMAIL ADDRESS	

**COMPANY'S INFORMATION**

NAME		
ADDRESS		
AUTHORIZED REPRESENTATIVE	Name:	Position:
CONTACT NOS.		
EMAIL ADDRESS		

We are pleased to submit the attached comments / feedback in response to your call for comments/feedback dated February 14 2024, to the *draft* revised Trinidad and Tobago Corporate Governance Code 2024.

Signature:

---

Authorized Representative / Individual

Date:

---

COMPANY STAMP