

To: CO
..... (Insert unit)
..... (Insert Address)
.....
.....
.....

SUPERVISOR NOTIFICATION OF DISQUALIFICATION PROFORMA

1. The following boxer from your unit was subject to a disqualification decision at a boxing event held at:

.....on:

- a. Regt No: d. Ints:
- b. Rank: e. Boxing Registration No:.....
- c. Surname:

2. Details of the event and circumstances relating to this decision are:

- a. Event: b. Bout No :
- c. Referee: d. Reg No:
- e. Circumstances:

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3 .Additional Information:

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Signed:
Rank/Name:
Reg No/Qual:
Date:

To be completed by the Supervisor and forwarded as indicated