

Name of applicant:

Applicant's Organisation:

## CERTIFIED EVENT MANAGER (CEM) – SUPPLIER REFEREE REPORT CONFIDENTIAL

Name o	of Referee:				
Organis	sation:				
Contac	t Phone Number:				
Email a	address:				
		cant as a referee to support an application for industry ference Organisers Association Inc.			
	formation and/or comments prov CO Association Inc.	ided in this referee report will remain confidential to			
	send your completed referee r ssociation at PO Box 186, Macqu	eport and any supporting information directly to the larie ACT 2614.			
provide		ant, we would appreciate you taking some time to experience and relationship with the applicant in the			
<ol> <li>Professional Conduct – in the course of supplying products and/or service applicant act in a professional manner at all times?</li> </ol>					
	Yes	No			
	Comment:				
2.	<b>Lead times</b> – have you been satisfied with the lead times the applicant has given you in order for you to supply your goods and services to the applicant in a timely manner?				
	Yes	No			
	Comment:				

3.	<b>Financial Management</b> – have you been satisfied with the time taken by the applicant to settle your account for the goods and services you supplied?				
	Yes		No		
	Comment:				
(	GENERAL COMMEN	rs:			_
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	you for taking the time below:	to supply this refe	ree report. Please pro	vide your contact	
Phone					
Email:					
his re	nave any questions re feree report, please e Report to:				
lillian I	Montoro				

Jillian Masters
PCO Association Inc.
PO Box 186
Macquarie ACT 2614

Email: <a href="mailto:council@pco.asn.au">council@pco.asn.au</a>
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