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|  | | |
| **COUNCIL ELECTION – TUESDAY 21 AUGUST 2018** | | |
| **NOMINATION FORM** | | |
|  | | |
| **TO BE FORWARDED TO THE RETURNING OFFICER** | | |
| **PO BOX 815 DICKSON ACT 2602** | | |
| **BY CLOSE OF BUSINESS, FRIDAY, 10 AUGUST 2018** | | |
|  | | |
| I |  | |
| Signed |  | |
| Financial Membership No |  | |
| Hereby nominate |  | |
| For the position of |  | |
|  |  | |
| Seconded by |  | |
| Signed |  | |
| Financial Membership No. |  | |
|  |  | |
| I |  | |
| The person nominated above agree to accept the nomination | | |
|  |  | |
| Financial membership No |  | |
| Signed |  | |
| Dated |  | |
| I understand that if elected, I will hold this position for a period of 2 years | | |
|  |  | |
| Positions available | **PRESIDENT**  **TREASURER** | |
| **4 X COUNCIL MEMBERS** | | |
|  | | |
|  | | |
| Date received | |  |
| Initials of Returning Officer | |  |