

NOMINATION FOR

THE LEGISLATIVE ASSEMBLY

For Candidates <u>NOT</u> Endorsed by a Registered Political Party

OFFICE USE ONLY

<u> </u>								
l,								
(state name in	n full)							
for and on behalf of the Electoral Commission of Queensland, certify that I have received the nomination of:								
(state name in full)								
together with a deposit of \$250.00, at	_ *am/pm							
on								
Signature	Date							

^{*} Strike out whichever is inapplicable







ELECTORAL ACT 1992

NOMINATION FOR THE LEGISLATIVE ASSEMBLY NOMINATION BY AT LEAST SIX ELECTORS

to the Electoral Commissioner / Returning Officer										
We, the electors on the electoral roll for the Electoral District of hereby nominate										
	·	as a candida	te for election as a							
Member of the Legislative Assembly for that Electoral District.										
te/ (Note: In case one or more nominators is not properly enrolled, it is suggested that more than six nominators complete the details below										
Given Name(s)	Enrolled Address	Date of Birth	Signature	Office Use						
1	e electoral roll for the Electoral roll for the Electoral roll for that Electoral roll for the Electoral roll	e electoral roll for the Electoral District of utive Assembly for that Electoral District. (Note: In case one of suggested that more the	e electoral roll for the Electoral District of as a candidate stive Assembly for that Electoral District. (Note: In case one or more nominate suggested that more than six nominate suggested that more than six nominate.)	e electoral roll for the Electoral District of as a candidate for election as a attive Assembly for that Electoral District. (Note: In case one or more nominators is not properly enrolle suggested that more than six nominators complete the details in the complete of the details in the case one or more nominators complete the details in the case of						

NOTE: A deposit of \$250.00 must accompany this Nomination. The deposit must be in the form of either a <u>Bank Cheque</u> made payable to the "Electoral Commission of Queensland" or in <u>Cash</u>





ELECTORAL ACT 1992

CANDIDATE'S CONSENT AND DECLARATION

CANDIDA	CANDIDATE DETAILS (as enrolled)							
Title	Family Name		Given Name		Other Names	3		
Date of B	of Birth Gender Occupation		oation					
	NOTE: If you are enrolled on the Electoral Roll as a Silent Elector, do not insert your address details here but please separately supply ECQ or the Returning Officer with an address for contact purposes.							
Enrolled Address								
Postal Address (if different)								
NAME TO	O APPEAR ON BALLOT P	APER						
CONTAC	T DETAILS							
Contact information will be published on the Commission's Website. If you do not wish some or all of the "Contact Details" to appear on the Web, please indicate by ticking the "NO" boxes				Release Publicly? (Tick ✓ if No)				
Family Na	me	G	iven Name(s)					
Postal Add	dress					No 🗌		
Telephone	e Details	В	usiness Hours			No 🗌		
		Af	ter Hours			No 🗌		
		М	obile			No 🗌		
Facsimile						No 🗌		
Email Add	ress					No 🗌		
CANDIDA	ATE DECLARATION	·						
I,		, the ca	ndidate in the nomination, here	by state	that I:			
Consent to being nominated for election as a Member of the Legislative Assembly for the Electoral District of								
CONDITI	ONS							
I am enrolled on the electoral roll for the State of Queensland; Am an adult living in Queensland Am an Australian Citizen: Tick one box and complete by Grant of Australian Citizenship (date) Note: It is the responsibility of the ensure that he/she is eligible for not that at least six (6) of the persons are enrolled on the electoral roll for district concerned.				eligible for nomination; and the persons listed on Page 2				
complete appropriat details.	e	-	(date))		
Am not a disqualified person under Subsection (2) or (3) of Section 64 of the Parliament of Queensland Act 2001.								
	Signature of Candidate Date							

