

**MANAGEMENT COMMITTEE NOMINATION FORM**

I, the undersigned, being a financial (VOTING) Member of Queensland Local Government Reform Alliance Inc. hereby nominate for appointment as a member of the Committee of Management for the position of (President, Treasurer, Vice President, Secretary, General Committee Member) (*please circle respective position*)

**Name of NOMINEE:** \_\_\_\_\_

Mr/Mrs/Miss/Ms: \_\_\_\_\_

Membership Number: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Name of NOMINATOR:** \_\_\_\_\_

Membership Number: \_\_\_\_\_

Signature of Nominator: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Name of SECONDER:** \_\_\_\_\_

Membership Number: \_\_\_\_\_

Signature of Seconder: \_\_\_\_\_

Dated: \_\_\_\_\_

**DECLARATION OF NOMINEE:**

I, \_\_\_\_\_ being a financial Voting Member of Queensland Local Government Reform Alliance Inc., agree to stand for election as a member of the Committee of Management for the position of (*please tick respective position*)

- |                              |                                  |
|------------------------------|----------------------------------|
| ▪ <i>President</i>           | ▪ <i>IT Officer / Web Master</i> |
| ▪ <i>Vice President</i>      | ▪ <i>Media Officer</i>           |
| ▪ <i>Secretary</i>           | ▪ <i>Newsletter Editor</i>       |
| ▪ <i>Assistant Secretary</i> | ▪ <i>Event Planner</i>           |
| ▪ <i>Treasurer</i>           | ▪ <i>Management Committee</i>    |
| ▪ <i>Membership Officer</i>  | ▪ <i>Life Membership</i>         |

Signature of Nominee: \_\_\_\_\_

Dated: \_\_\_\_\_

**PLEASE NOTE: ANY NOMINATION WILL BE INVALID IF ALL PERSONS NAMED HERE ARE NOT CURRENT FINANCIAL MEMBERS OF THE QLGRA.**

Nominations close at 5.00 PM on: **Friday 11<sup>th</sup> November 2022**

Email, or Mail Nominations to: The Secretary Email: [secretary@qlgra.org.au](mailto:secretary@qlgra.org.au)

Postal address: The Secretary  
QLGRA Inc  
PO Box 398  
Sarina QLD 4737

