



LOCAL AUTHORITY NOMINATION

two ways :: one outcome

To the Returning Officer Central
Desert Regional Council

Nominee Consent and Declaration

LOCAL AUTHORITY AREA _____

I, _____
(First name) (Family name)

of _____
(Residential Address)

(Signature of Nominee) ____/____/____
(Date)

I hereby consent to be nominated as an ordinary member of Local Authority and **I declare that I am eligible** to be nominated as a member because I am aged 18 years or over.

(Signature of Seconder) ____/____/____
(Date)

(Name and signature of Returning Officer) ____/____/____
(Date)