



NOMINATION FORM

ALGWA Management Committee Queensland Branch 2018-2020

We, the undersigned hereby nominate _____

as a candidate for election to the position of _____

Nominee

Surname	Christian or given name	Residential address	Signature

Nominated by:

Surname	Christian or given name	Residential address	Signature

Seconded by:

Surname	Christian or given name	Residential address	Signature

Dated this _____ of _____ 2018

Signatories on this nomination form must be **current financial members** of the Australian Local Government Women's Association Qld Branch Inc.

Nominations close with ALGWA Queensland Branch Secretary on **Monday, 20 August 2018** and should be returned to Karen Murray, ALGWA Queensland Branch Secretary via:

Email: karenmurray@logan.qld.gov.au

Or

Mail: Karen Murray
ALGWA Queensland Branch Secretary
Private & Confidential
Logan City Council
PO Box 3226
LOGAN CITY DC QLD 4114