Nomination of a Candidate or Candidates by a Registered Political Party or a Registered Ballot Group * ACT Legislative Assembly		
Nomination by Registered Officer		
To: The Electoral Commissioner		
I,		
(Name of Registered Officer)		
of		
(Name of Registered Party or Ballot Group) hereby nominate the person or persons named on this form as a candidate or candidates for election to		
the ACT Legislative Assembly for the electorate of:		
(Tick one box only) Brindabella: Ginninderra:	Molonglo:	
(Tick one box only) The registered name: registered abbrevia Signature of		
Registered Officer:	Date: / /	
Contact details for candidates		
The person named as contact officer should be someone who can readily relay information to the candidates		
Name of Contact Officer:		
Phone (H): Phone (W):	Phone (Mob):	
Fax: Email:		
Office use only		
Date received: / / Time	: Deposit received? Yes No	
Received by:	Signed:	
* iRegisteredî means registered under the ACT <i>Electoral Act</i> 1992 05/01 ACT Electoral Commission		

Candidate(s) to complete this section		
Candidate I	Candidate 2	
<ul> <li>I, THE CANDIDATE NAMED BELOW, STATE THAT:</li> <li>I am an Australian citizen</li> <li>I am at least 18 years of age</li> <li>I am an elector or qualified to be an elector AND I DECLARE THAT:</li> <li>I am eligible to be nominated for election</li> <li>I consent to this nomination for election and to be a Member of the Legislative Assembly if elected.</li> </ul>	<ul> <li>I, THE CANDIDATE NAMED BELOW, STATE THAT:</li> <li>I am an Australian citizen</li> <li>I am at least 18 years of age</li> <li>I am an elector or qualified to be an elector AND I DECLARE THAT:</li> <li>I am eligible to be nominated for election</li> <li>I consent to this nomination for election and to be a Member of the Legislative Assembly if elected.</li> </ul>	
Surname:	Surname:	
Given names in full:	Given names in full:	
Given name(s) to be printed on the ballot paper:	Given name(s) to be printed on the ballot paper:	
Residential address *:	Residential address *:	
Occupation:	Occupation:	
Signature:	Signature:	
Candidate 3	Candidate 4	
I, THE CANDIDATE NAMED BELOW, STATE THAT: I am an Australian citizen I am at least 18 years of age I am an elector or qualified to be an elector AND I DECLARE THAT: I am eligible to be nominated for election I consent to this nomination for election and to be a Member of the Legislative Assembly if elected. Surname:	I, THE CANDIDATE NAMED BELOW, STATE THAT: I am an Australian citizen I am at least 18 years of age I am an elector or qualified to be an elector AND I DECLARE THAT: I am eligible to be nominated for election I consent to this nomination for election and to be a Member of the Legislative Assembly if elected. Surname:	
Given names in full:	Given names in full:	
Given name(s) to be printed on the ballot paper:	Given name(s) to be printed on the ballot paper:	
Residential address *:	Residential address *:	
Occupation:	Occupation:	
Signature:	Signature:	

\* Note all details on this form will be publicly available. Where a candidate is address is suppressed from the electoral roll, this form should not show that address, but in that case the candidate must notify the Commissioner in writing of a correspondence address for the candidate.

## Candidate(s) to complete this section

## Candidate 5

- I, THE CANDIDATE NAMED BELOW, STATE THAT:
- I am an Australian citizen
- I am at least 18 years of age
- I am an elector or qualified to be an elector
- AND I DECLARE THAT:
- I am eligible to be nominated for election
- I consent to this nomination for election and to be a Member of the Legislative Assembly if elected.

Surname:

Given names in full:

Given name(s) to be printed on the ballot paper:

Residential address \*:

Occupation:

Signature:

## Candidate 7

I, THE CANDIDATE NAMED BELOW, STATE THAT:

- I am an Australian citizen
- I am at least 18 years of age
- I am an elector or qualified to be an elector
- AND I DECLARE THAT:
- I am eligible to be nominated for election
- I consent to this nomination for election and to be a Member of the Legislative Assembly if elected.

Surname:

Given names in full:

Given name(s) to be printed on the ballot paper:

Residential address \*:

Occupation:

Signature:

\* Note all details on this form will be publicly available. Where a candidate s address is suppressed from the electoral roll, this form should not show that address, but in that case the candidate must notify the Commissioner in writing of a correspondence address for the candidate.

- I, THE CANDIDATE NAMED BELOW, STATE THAT:
- I am an Australian citizen
- I am at least 18 years of age
- I am an elector or qualified to be an elector
- AND I DECLARE THAT:
- I am eligible to be nominated for election
- I consent to this nomination for election and to be a Member of the Legislative Assembly if elected.

Surname:

Given names in full:

Given name(s) to be printed on the ballot paper:

Residential address \*:

Occupation:

Signature: