

TEAM NOMINATION COVER SHEET

Australian Municipal, Administrative, Clerical and Services Union

Queensland Together Branch Vacancy Elections 2017

- A team nomination must nominate an eligible (or required number of people) for each position for which nominations have been called to comply with National Rule 40(f)(v)
- This coversheet must accompany a Team Nomination Attachment **for every position** listed on the election notice.
- An incomplete Team Nomination cannot be rectified after the close of nominations.
- If an incomplete Team Nomination is not complete by the close of nominations, the Returning Officer will reject the team but treat the nominations as individual nominations.

[Please use BLOCK LETTERS]

TEAM NAME

TEAM CONTACT:

Name: _____

Address: _____

_____ postcode _____

Phone: (Daytime contact) _____

Email _____

NOTE TO TEAM CONTACT

- You should verify the financial status and any other qualifications required by your Organisation's rules for all team nominees prior to lodging nominations.
- The nominees must be nominated by AT LEAST TWO eligible financial members from the same Branch or Industry Division (if applicable). See Federal Rule 40(j)

HOW TO LODGE NOMINATIONS

By post: PO Box 1926, SUNSHINE PLAZA QLD 4558

By hand: AEC Office, 54 Baden Powell St, MAROOCHYDORE QLD 4558

By fax : (07) 3049 2185

By Email: sunshinecoastareaoffice@aec.gov.au

Note: Emails greater than 6MB in size may not be accepted by the AEC's firewall

Team Nominations must be received by the Returning Officer, David McKenzie, Australian Electoral Commission by no later than **12 Noon (AEST) on Friday 1 September 2017.**

Nominations cannot be withdrawn after 12 Noon (AEST) on Friday 8 September 2017.

TEAM NOMINATION – ATTACHMENT *(one per position)*

Australian Municipal, Administrative, Clerical and Services Union Queensland Together Branch Vacancy Elections 2017

[Please use BLOCK LETTERS]

TEAM NAME: _____

NOTE TO NOMINEE AND NOMINATORS

- This nomination form must be submitted with a **Team Nomination Cover Sheet** together with the required number of nominations for all offices listed on the election notice.
- You should verify your financial status and any other qualifications required by your Organisation's rules prior to lodging nominations.
- The nominee must be nominated by AT LEAST TWO eligible financial members **from the same Branch or Industry Division & Sub Division/Zone (if applicable)**.

NOMINATORS (Please use block letters)

We the undersigned financial members of the _____
Name of Industry Division & Sub Division/Zone (if applicable)

nominate: Mr/Mrs/Ms/Miss _____
Full name of nominee in block letters

for the office of: _____
Name of office as it appears in the Election Notice

Full name of nominators	Signature	Membership No.

NOMINEE'S ENDORSEMENT (Please use block letters)

I, Mr/Mrs/Ms/Miss _____ Membership no _____
PRINT YOUR NAME AS YOU WISH IT TO APPEAR ON THE BALLOT PAPER

1. am eligible for office under the rules of the ASU and I accept nomination for the office named above.
2. accept that I am nominating for this office as part of the Team named above.

Address: _____ postcode _____

Work phone: _____

Email _____

Signature of nominee: _____ Date: ____ / ____ / 2017

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