



Party Nomination Lodgement Form and Receipt

Legislative Council

Registered Political Party: _____

I, _____, of the registered political party named above
(Party Secretary)

- declare that the candidates named below are publicly recognised by the party as being endorsed candidates of the party and authorise use of the party name (or abbreviation) on the ballot paper, and
- submit this claim for the grouping of candidates in the order indicated below.

Signature of Party Secretary

Date

Phone

Email

Whole of State Electorate	Nomination & Deposit Received	Whole of State Electorate	Nomination & Deposit Received
1	<input type="checkbox"/>	20	<input type="checkbox"/>
2	<input type="checkbox"/>	21	<input type="checkbox"/>
3	<input type="checkbox"/>	22	<input type="checkbox"/>
4	<input type="checkbox"/>	23	<input type="checkbox"/>
5	<input type="checkbox"/>	24	<input type="checkbox"/>
6	<input type="checkbox"/>	25	<input type="checkbox"/>
7	<input type="checkbox"/>	26	<input type="checkbox"/>
8	<input type="checkbox"/>	27	<input type="checkbox"/>
9	<input type="checkbox"/>	28	<input type="checkbox"/>
10	<input type="checkbox"/>	29	<input type="checkbox"/>
11	<input type="checkbox"/>	30	<input type="checkbox"/>
12	<input type="checkbox"/>	31	<input type="checkbox"/>
13	<input type="checkbox"/>	32	<input type="checkbox"/>
14	<input type="checkbox"/>	33	<input type="checkbox"/>
15	<input type="checkbox"/>	34	<input type="checkbox"/>
16	<input type="checkbox"/>	35	<input type="checkbox"/>
17	<input type="checkbox"/>	36	<input type="checkbox"/>
18	<input type="checkbox"/>	37	<input type="checkbox"/>
19	<input type="checkbox"/>		

I acknowledge receipt of nomination form(s) and a deposit for \$2,000 in money, cheque drawn by a financial institution on itself or received EFT, made payable to the Electoral Commissioner for each of the candidate(s) named above capped at \$10,000 totalling \$_____.

Name of Authorised Officer
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Signature of Authorised Officer
Approved as of: 29/05/2024

Date
Version: 1.1