

To the Returning Officer for the Whole of State Electorate

Election Date:

/ /

Candidate details (Please print clearly)

As soon as practicable after the close of nominations a candidate's name, occupation and primary residential address will be released publicly and advertised (Note: address will be suppressed if the candidate is a silent elector).

Title	<input type="text"/>	Surname	<input type="text"/>		
Given Names	<input type="text"/>				
Date of Birth	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YYYY"/>	Gender (M/F/I)	<input type="text"/>

I am a silent elector on the State electoral register Yes No

Primary residential address (DO NOT complete if you are a silent elector)

<input type="text"/>		
<input type="text"/>	Postcode	<input type="text"/>

Postal address
(leave this blank if it is the same as your residential address)

<input type="text"/>		
<input type="text"/>	Postcode	<input type="text"/>

Please tick the relevant box relating to the public release of your contact details.

Phone (Home)	<input type="text"/>	Release publicly? Yes <input type="checkbox"/> No <input type="checkbox"/>
Phone (Mobile)	<input type="text"/>	Release publicly? Yes <input type="checkbox"/> No <input type="checkbox"/>
Email address	<input type="text"/>	Release publicly? Yes <input type="checkbox"/> No <input type="checkbox"/>
Phone (Work)	<input type="text"/>	Release publicly? Yes <input type="checkbox"/> No <input type="checkbox"/>

Form in which name is to be printed on ballot paper²

Surname, Given Name(s)

Occupation

<input type="text"/>

Candidate statement and declaration

I, the candidate named opposite, declare that:

- I nominate myself to serve as a candidate for the whole of state electorate election for which this nomination relates.
- I have resided in Western Australia for one year.
- I am not subject to any legal incapacity.
- I am qualified¹ under the laws of the State to be elected as a Member of the Legislative Council.
- I am not, and do not intend to be, a candidate in any other election to be held on the same day as the election to which this nomination relates.
- I consent to act as a member of the Legislative Council if elected.
- I wish my name to appear on the ballot paper in the form shown opposite.
- If successful, I consent to my details being provided to Parliament for contact purposes.

Signature of candidate

<input type="text"/>			
Date	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YYYY"/>

Notes:

1. For qualifications of candidates, refer to *Eligibility for Membership of State Parliament* brochure or *Candidates Guide – Legislative Council*, published by the Western Australian Electoral Commission or the *Electoral Act 1907*, the *Constitutions Act Amendment Act 1899* and other relevant legislation.
2. The candidate's name to be printed on the ballot papers shall include the candidate's surname and must include each, or one or more of the candidate's given names.
For this purpose, a given name may be:
 - (a) the name
 - (b) an initial standing for the name, or
 - (c) a commonly accepted variation of the name (including an abbreviation or truncation of the name or an alternative form of the name).

Additional forms which may require completion are:

- (a) Form RO 20 *Supplementary Nomination Details for Candidates and Groups – Legislative Council* which contains the following and must be lodged before the close of nominations:
 - application and authorisation for printing of the word **Independent** or a **registered political party name** on ballot papers for a group or candidate
 - claim for grouping of candidates
- (b) Form RO21 *Withdrawal of claim for grouping of candidates*
- (c) At least 250 signed declarations from supporters on the form RO019A who are entitled to vote in the election. These supporters cannot support another candidate in the election.

Remember that you, and members of your group if applicable, may need to complete RO20 if you wish to be grouped together.

Receipt for nomination and deposit

I acknowledge receipt of a deposit of \$2,000 in money or cheque drawn by a financial institution on itself, by electronic transfer and payable to the Electoral Commissioner and a nomination paper in respect of:

BSB: 066 040 Account: 17800095

Name of candidate

<input type="text"/>

Signature of Returning Officer

<input type="text"/>	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YY"/>
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