

Director's Nomination Form

I, _____ (Print full name)

of

_____ (Print postal address)

accept nomination for election as a director of Palms Australia.

Signed: _____ Date: _____

As a member of Palms Australia I,

_____ (Print full name)

nominate the above named candidate for election as a director of Palms Australia.

Signed: _____ Date: _____

As a member of Palms Australia I,

_____ (Print full name)

second the nomination of the above named candidate for election as a director of Palms Australia.

Signed: _____ Date: _____

This form should reach:

The Returning Officer, Palms Australia, PO Box 3109, PETERSHAM NORTH NSW 2049

(Email: palms@palms.org.au)

no later than 9am, September 9, 2020