

Nomination Form

for the 2024/25 Committee

of your

Port Mandurah Ratepayers' Association Inc.

NOMINEE

I, _____ of _____
confirm that I'm a Port Mandurah rate payer and that I consent to my nomination for the PMRA
Committee.

Signed _____ Date _____ / _____ /2024

NOMINATOR

I, _____ of _____
confirm that I'm a Port Mandurah rate payer and that I nominate the above named for the PMRA
Committee.

Signed _____ Date _____ / _____ /2024

SECONDER

I, _____ of _____
confirm that I'm a Port Mandurah rate payer and that I second this nomination for the PMRA
Committee.

Signed _____ Date _____ / _____ /2024

*Please fill in the form above if you would like to nominate yourself or someone else to the
committee.*

Hand the form to the President or Secretary before the start of the meeting.

*If fewer than ten written nominations are received, then nominations will also be invited from the
floor.*

Check you live within the PMRA boundary: <https://portmandurah.com.au/wp-content/uploads/2019/03/PMRA-Boundary.pdf>