



**Nomination Form for Election to hold the position of  
TREASURER on the Network’s Board (two-year position)**

Please complete the form below (or at <https://forms.office.com/r/am8wRgmTwa>) and return the form to the Network no later than **3pm Monday 18 November 2024 NO EXCEPTIONS**. Only Network members, **both primary and associate**, are eligible to nominate. Only a primary member may second a nomination – we can arrange for a seconder if you don’t know someone who can second for you.

**NB:** Where a seat is contested, individuals nominating will each be granted **2 minutes** to address the attendees to put forth their case for election. Each candidate may only address the AGM once.

I, ..... wish to nominate for the position  
(Your Name)  
of **TREASURER** on the ACT Mental Health Consumer Network Board 2024-26.

Under the *Associations Incorporation Act 2009* (ACT) it is an offence to accept a position on the Board if you:

- have been convicted of an offence in relation to the promotion, formation or management of a body corporate; or an offence involving fraud or dishonesty punishable by imprisonment for a period of 3+ months and the conviction or your release from prison was within the last 5 years; or
- are bankrupt or personally insolvent

**Maximum penalty: 50 penalty units and/or 6 months imprisonment.**

**NB: Please only nominate for a Board position if you can personally answer ‘yes’ to these two questions.**

1. I have not been convicted of one of the abovementioned offences.
2. I am not bankrupt or personally insolvent.

Signature: .....  
(Your Signature – if sent via email, your email will be considered your electronic signature)

Please contact [policy@actmhc.org.au](mailto:policy@actmhc.org.au) or 0449 127 941 if you need help having your form seconded.

I second the above nomination (the seconder must be a Primary Member of the Network):

Name: .....

Signed: ..... (or a confirmation email from the seconder)