



GUNDITJ MIRRORING

Traditional Owners
Aboriginal Corporation
RNTBC

4/48 Edgar Street Phone: +61 (03) 5527 1427
PO Box 216 Fax: +61 (03) 5527 1704
Heywood VIC 3304 ABN 30 030 646 482 ICN 4672

DIRECTOR NOMINATION FORM (All Members are Invited to Nominate)

I HEREBY NOMINATE as Director of Gunditj Mirring Traditional Owners Aboriginal Corporation:

Name: _____

Address: _____

Date of Birth: _____

Apical Ancestor
(as on Register of
Members): _____

Why would you
make a good
Director? Outline
your relevant
experience

Why would you
make a good
Director? Outline
your relevant
experience (cont'd)

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Please note, Directors/sitting fees will not be paid, however reasonable travel costs will be reimbursed.

Please return the completed form by close of business Friday, 1 December 2017 (the form must be received before this date) to:

Mail:
MLCS Corporate
Attn: Paul J. Case
PO Box 2691
KENT TOWN SA 5071

Email:
paul@mlcscorporate.com.au

This form is also available on the Corporation's website.

OFFICE USE ONLY	
Date Form Received:	_____
Form Received By:	<input type="checkbox"/> Mail <input type="checkbox"/> Email