



AUSTRALASIAN INSTITUTE
OF MARINE SURVEYORS

State Representative to the Council Nomination Form

For the election of State Representative Members of the Council for the year
2016/2017

We, the undersigned members of the _____ **<insert State>** Branch of
the Australasian Institute of Marine Surveyors hereby nominate **<<insert nominees name
below>**

for the position of:

STATE REPRESENTATIVE TO THE COUNCIL

Proposed by: _____

Signature _____ Date _____

Seconded by: _____

Signature _____ Date _____

I, (*nominee*) _____ agree to the above nomination.

Signature _____ Date _____

Please note that all nominations MUST be received by the Executive Officer **by close
of business on the 15th June 2016.**

Nominations can be emailed to the Executive Officer on
execoff@aimsurveyors.com.au or via post to

The Executive Officer, PO Box 6255 Kingston ACT 2604