TRINITY COMMUNITY COUNCIL

NOMINATION PAPER FOR ELECTED REPRESENTATIVE

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seconder	proposer	
		Full Name (forename and surname)
		Home Address
		Contact Tel. No.
		E-Mail address
		Electoral No. (for office use only)

being persons residing in and appearing on the electoral register for the area of Trinity community council, hereby nominate

nominee	
	Full name (forename and surname)
	Address
	Contact Tel. No.
	E Mail address
	Electoral No. (for office use only

as a candidate for election as an elected representative on the Community Council.

PLEASE NOTE THAT YOU MAY ONLY PROPOSE OR ACT AS A SECONDER FOR ONE PERSON

Date	Signature of seconder	Date	Signature of proposer
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