

SIGNATURE REGISTRATION

Queensland
Labor



Form J

For use in preselection and other ballots
within the Australian Labor Party (Qld).

Surname _____ Given Names _____

Date of Birth _____

Address _____
(Home/Enrolled Address as at 31 January)

Postcode _____

Postal Address _____
(Current Postal Address if different)

Postcode _____

Phone _____ E-mail _____

I am enrolled to vote (as at 31 January) in:

State Electorate _____

Federal Electorate _____

Local Government _____

I am a registered member of:

ALP Branch _____

ALP Membership Number _____

I understand that the signature below will be used for comparison with the signature I use on a postal vote declaration envelope, Petition for Candidate Nomination or other purpose as determined by the Administrative Committee.

Signed _____

Date _____

Witness name _____
(Witness to print full name)

Witness signature _____

Witness ALP membership number _____

Send completed form to:
General Returning Officer
PO Box 5286
West End Q 4101

FOR OFFICIAL USE

Application received by: _____

Authorisation (position): _____

Date approved: _____