

**NOTE:** 

## Enterprise agreement scrutineer appointment form

EA Name:		Date/
Authorisation by organisation		
To: The NT Electoral Commission		
Title Given name/s	Surname	
I hereby appoint		
Residential address	Suburb	State Postcode
of		
as a representative of:		
		(Name of organisation)
at the determination of the results of the ba	allot.	
Name	Title/position	
Cinneture of automication/s data cate	Date / /	
Signature of organisation's delegate		
Undertaking by scrutineer		
Title Given name/s	Surname	
I,		
Residential address	Suburb	State Postcode
of		
Occupation		
will undertake		
<ul> <li>the duties of scrutineer in an orderly</li> </ul>	manner	
<ul> <li>not to disclose any knowledge officia</li> </ul>		
elector, except in reply to a question		swer
Simple of anytings	Date	
Signature of scrutineer		
Endorsed section		
Title Given name/s	Surname	
Authorised scrutineer		
Endorsed	Not endorsed	
Name	Title/position	
Delegate		
	Date	
Signature of delegate		

Completed forms can be returned by email: netvote.ntec@nt.gov.au or delivered to: Level 3, TCG Centre, 80 Mitchell St, Darwin NT 0801