**NOMINATION FORM FOR B CLASS SHAREHOLDER-ELECTED DIRECTOR**

**Nominations open at 9am on 7 August and close at 5pm on 18 August 2023**

**Candidate**

Name

Address

Landholding Reference No

Contact numbers (Home)

(Mobile)

Email

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, declare that I meet the eligibility requirements\* for nomination as a director of Murrumbidgee irrigation Limited (the Company) and hereby provide my consent to the Company to conduct such reasonable due diligence as is necessary to confirm my eligibility. I also consent to act as a director of the Company if successfully elected.**

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*refer to p3 for a summary of the eligibility requirements applicable to candidate, proposer and seconder*

**Proposer**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_ \_\_\_\_

Landholding reference \_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Seconder**

Name \_\_\_\_

Address \_\_\_\_ \_\_\_\_

Landholding reference \_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The candidate is requested to provide additional information about their skills and experience:**

I hold the following qualifications (academic/trade/professional)

I am a member of the following organisations

I offer the business the following skills and experience

**Forms should be marked Confidential and forwarded to Link Market Services Limited using one of the following methods:**

|  |  |
| --- | --- |
| **Email** | [MI@linkgroup.com](mailto:MI@linkgroup.com)  OR |
| **Post** | Link Market Services Limited, Locked Bag A14, Sydney South NSW 1235  OR |
| **In Person** | Link Market Services Limited, Level 12, 680 George Street, Sydney NSW 2000 |

**Eligibility to be nominated**

The following criteria, as per rules 19, 21 and 45 of the Company’s Constitution, the Board Charter, and the *Corporations Act 2001* (Cth), must be satisfied for the nomination to be valid:

|  |  |
| --- | --- |
| **Age** | The nominee must be at least 18 years of age |
| **No disqualifications** | The nominee must not be disqualified from managing a corporation under the *Corporations Act 2001* (Cth) |
| **Shareholder in own right**  **OR**  **Member and Sole Body Corporate Representative of a corporate shareholder** | Either:   1. The nominee holds voting B class shares in their own name and owns a Landholding registered in the same name as the shares,   **OR**   1. The nominee is the Sole Body Corporate Representative\* of, and a shareholder of, a member, and that member: 2. holds voting B class shares; and 3. is a landholder; and 4. is a company or co-operative. |
| **Financial** | The Board Charter requires member directors **to be financial** to hold the position as a director. This means that all charges have been paid by their due date, or alternatively, the member director has an approved payment arrangement with the Company and is not in breach of the terms of that arrangement. |
| **No employees** | The nominee must not be an employee of the company |
| **Proposer & Seconder requirements** | The proposer and seconder must be a voting B class shareholder in their own name, or as the authorised representative of a corporate member |

\* Nominees who are nominating as a member and Sole Body Corporate Representative of a corporate shareholder will be required to complete the enclosed statutory declaration confirming they satisfy the criteria to be nominated ***and*** must provide an up-to-date ASIC extract confirming the same.

Statutory Declaration

*OATHS ACT 1900*, NSW, EIGHTH SCHEDULE

I, , do solemnly and sincerely declare that

*[name of declarant]*

and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act 1900*.

Declared at: on

*[place] [date]*

*[signature of declarant]*

in the presence of an authorised witness, who states:

I, , a ,

*[name of authorised witness] [qualification of authorised witness]*

certify the following matters concerning the making of this statutory declaration by the person who made it: *[\* please cross out any text that does not apply]*

1. \*I saw the face of the person *OR* \*I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification[[1]](#footnote-1) for not removing the covering, and
2. \*I have known the person for at least 12 months *OR* \*I have confirmed the person’s identity using an identification document and the document I relied on was …………...………………………………….

[*describe identification document relied on]*

*[signature of authorised witness] [date]*

1. The only “special justification” for not removing a face covering is a legitimate medical reason (at September 2018) [↑](#footnote-ref-1)