

# **Director Nomination Form**

## PART 1 - MEMBER NOMINATED AS A CANDIDATE FOR ELECTION AS A DIRECTOR

Member No.			First Name		Last Name		
Unit/Street No.		Stre	eet		Suburb Po		Post Code
Date of Birt	h	Place of Birth (Town, State, Country if not Australia)		Occupation			
★ Home	Phone	No.	) Mobile F	Phone No.		■ Work Phone No.	
⁴ e-mail addre	ss (if a	applicable)					
D.D.T. 0.011	0 = N = T	TO 10T					
PART 2 - CON	SENT	TO ACT					
Pursuant to Section 201D of the Corporations Act 2001 (Cth) and Clause 37 of the Constitution of Ostomy NSW Limited ABN 92 003 107 220 (the "Company"), I consent to act as a Director of the Company.  Nominee's signature: Date:							
PART 3 – PRO	POSE	R AND SE	CONDER DETAIL	_S			
			Duar				
Member No.	Proposer  Member No. Name Signature Date					Date	
			.0		-g. race		2 0.10
The Home F	★ Home Phone No. J Mobile Phone		one No.	No. Se Work Ph		one No.	
⊕ e-mail address (if applicable)							
Member No.	Seconder  Member No. Name Signature Date				Date		
Wombor 140.		rtan			igriatur		Date
★ Home Phone No.		) Mobile Phone No.			■ Work Phone No.		
e-mail addre	ss (if a	applicable)			•		

For this nomination to be valid, all parts must be correctly completed and the form received at the ONL offices no later than the time and date nominated in the Explanatory Memorandum attached to the Notice of Annual General Meeting . You can use one of the following methods to lodge the form:

- Post to PO Box 3068, Kirrawee, NSW 2232
- Tax to 02 9542 1400
- e-mail to info@ostomynsw.org.au

Member notes

# **Questions from Members Form**



## What this form is for

A Member who is entitled to vote at the Annual General Meeting, as explained in the Explanatory Memorandum accompanying the Notice of Annual General Meeting, may submit written questions to the Company Secretary or the external Auditor in advance of the meeting relating to:

- Business of the Company
- The Annual Financial Statements and Directors' Report
- The content of the Auditor's report
- The conduct of the audit or the Auditor's independence; or,
- The accounting policies adopted by the Company in relation to the preparation of the Annual Financial Statements and notes.

During the course of the AGM it is intended to respond to as many of the more frequently asked questions as is practicable in the limited time available.

Quest	ions			
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''				
Sign and submit questions				
Member No.	Name	Signature	Date	

Questions must be received at the ONL offices no later than the time and date nominated in the Explanatory Memorandum attached to the Notice of Annual General Meeting. You can use one of the following methods to submit your questions:

- Post to PO Box 3068, Kirrawee, NSW 2232
- Tax to 02 9542 1400
- e-mail to <a href="mailto:info@ostomynsw.org.au">info@ostomynsw.org.au</a>



	Step 1 – Appoint a Proxy				
	ing a Member of Ostomy NSW Limited and eligible to vote at the AG stitution, hereby appoint:	M in acco	ordance wit	th the	
	the Chair of OR the meeting				
act g not c Limit	or failing the individual named, or if no individual is named, the Chair of the meeting, as my proxy to act generally at the meeting on my behalf and to vote in accordance with the following directions (or if not directions have been given, as the proxy sees fit) at the Annual General Meeting of Ostomy NSW Limited to be held at 99 On York, 95-99 York Street, Sydney at 12:15 p.m. and at any adjournment of that meeting. The AGM precedes the members' luncheon.				
	Step 2 – Voting Directions				
<b>Ord</b> 1	inary Resolutions  Adopt the Remuneration Report in the Annual Financial Statements for the year ended 30th June 2015 Please refer to Annual Report to members for a brief description	For	Against	Abstain	
	of each of existing Board Member named below.				

Step 3 – Sign and Lodge					
Member No.	Name	Signature	Date		

For your proxy to be effective, it must be received at the ONL offices no later than the time and date nominated in the Explanatory Memorandum attached to the Notice of Annual General Meeting. You can use one of the following methods to lodge your proxy:

- Post to PO Box 3068, Kirrawee, NSW 2232
- Tax to 02 9542 1400

e-mail to info@ostomynsw.org.au