

## Application for a group on the ballot paper - two party group

### Declaration and authorisation

We, the undersigned party candidates nominating to contest the Legislative Council election, apply under section 58 of the *Electoral Act 1985* to have our names grouped and printed on the ballot paper in the order shown below.

1. Candidate	<input type="text"/>	Signature	<input type="text"/>
2. Candidate	<input type="text"/>	Signature	<input type="text"/>
3. Candidate	<input type="text"/>	Signature	<input type="text"/>
4. Candidate	<input type="text"/>	Signature	<input type="text"/>
5. Candidate	<input type="text"/>	Signature	<input type="text"/>
6. Candidate	<input type="text"/>	Signature	<input type="text"/>
7. Candidate	<input type="text"/>	Signature	<input type="text"/>
8. Candidate	<input type="text"/>	Signature	<input type="text"/>

We request that a group voting square be printed on the ballot paper :      Yes ☐      No ☐

### Registered officer information - first party

Mr ☐    Mrs ☐    Miss ☐    Ms ☐    Other

Family name       Given names

Phone number       Email address

Signature of registered officer       Date

Name of registered political party

### Registered officer information - second party

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

Given names

Phone number

Email address

Signature of registered officer

Date

Name of registered political party

### Ballot paper information

We, the registered officers of the two above-named registered political parties, request that the following composite name consisting of the registered names of our political parties be printed adjacent to the candidates' names on the ballot paper as shown above.

To be printed adjacent to the candidates' names

### Notes

1. This form must be accompanied by a completed nomination form RO 50 for each party endorsed group candidate, and a completed form RO 50A for each registered party.
2. Nomination forms RO 50, RO 50A and RO 50C must be lodged with Electoral Commission SA at least 48 hours prior to the hour of nomination.

### OFFICE USE ONLY

Date received

Time

AM  
PM

Signature of  
receiving officer