

Lostock Gralam Parish Council

Councillor Nomination Form

Mr/Mrs/Miss/Ms:	First Name:	Middle Name:	Surname:
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House No/Name:	Road Name:	Town:	Post Code:
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Home Telephone:	Mobile Telephone:	Email Address:
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Details of present employment:

Interests:

Membership of Local Organisations:

Any Other Information to be considered:
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1. Name & Address of Lostock Gralam elector who supports the co-option:	2. Name & Address of Lostock Gralam elector who supports the co-option:
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To be returned to:

**Lyndsey Sandison
Clerk of the Council
14, Mereworth Drive, Kingsmead, Northwich, Cheshire, CW9 8WY**

E-mail: lostockgralam.pc@outlook.com