











Please return the original signed form to the Central Council office



**St Vincent de Paul Society**  
*good works*

(Please print) .....Region

(Please print) .....Central Council

## REGIONAL COUNCIL PRESIDENT CANDIDATE DECLARATION

*I, the undersigned, confirm I have read and understand the Regional Council President Role Statement and declare that, if elected Regional Council President, I will comply fully with the Society Rule and the Role responsibilities and should I ever be unable or unwilling to comply I will stand down on a request of the Central Council President approved by State Council and subject to the Rule Part 3 Article 27 – Reconciliation Commission.*

**Signed in the presence of Central Council President or Nominee.**

### Candidate

**Name:** (please print) .....

.....  
Signature Date

**President of Central Council** or Nominee:

**Name** (please print) .....

.....  
Signature Date

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Please return the original signed form to the Central Council office for recording in the Member Register