

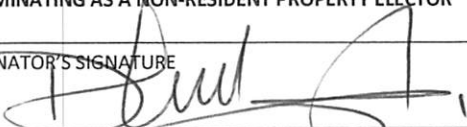
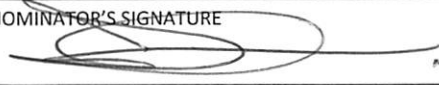
C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

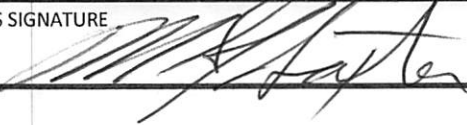
JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) CITY OF COLWOOD		ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA)
We, the following electors of the above named jurisdiction, hereby nominate:		
NOMINEE'S LAST NAME BAXTER	FIRST NAME MICHAEL	MIDDLE NAME(S) STANLEY JOHN
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT		
RESIDENTIAL ADDRESS (STREET ADDRESS) 3338 ACEMINK ROAD	CITY/TOWN COLWOOD	POSTAL CODE V9C 2J6
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN	POSTAL CODE
As a Candidate for the office of:		
POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR) COUNCILLOR	JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) COLWOOD	

Each of us affirms that to the best of our knowledge, the above named person nominated for office:


1. Is or will be on general voting day for the election, 18 years of age or older.
2. Is a Canadian citizen.
3. Has been a resident of British Columbia, as determined in accordance with section 67 of the *Local Government Act*, for the past six months immediately preceding today's date.
4. Is not disqualified under the *Local Government Act* or any other enactment from being nominated for, being elected to or holding the office, or is not otherwise disqualified by law.


NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) DOUGLAS CHARLES WILLOUGHBY	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) DAVID ARTHUR GROVE
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 3338 ACEMINK RD. VICTORIA B.C. V9C 2J6	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 3339 Wickham Road
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR Colwood BC V9C 1V6
NOMINATOR'S SIGNATURE 	NOMINATOR'S SIGNATURE 

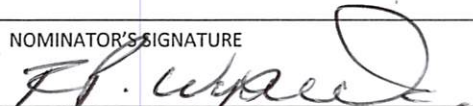
Please see over for additional space when more than two nominators are required. For local governments that require 25 nominators attach an additional sheet as necessary.

I consent to the above nomination for office:	
NOMINEE'S SIGNATURE 	DATE: (YYYY / MM / DD) 2018/09/05

CANDIDATE NOMINATION PACKAGE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <u>JUDITH MARY CULLINGTON</u>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <u>3338 ACEMINK ROAD</u>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
NOMINATOR'S SIGNATURE 	NOMINATOR'S SIGNATURE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <u>KAREN DENISE WYSIECKI</u>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <u>3344 ACEMINK RD</u>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
NOMINATOR'S SIGNATURE 	NOMINATOR'S SIGNATURE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <u>RICHARD PETER WYSIECKI</u>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <u>3344 ACEMINK RD</u>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
NOMINATOR'S SIGNATURE 	NOMINATOR'S SIGNATURE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
NOMINATOR'S SIGNATURE	NOMINATOR'S SIGNATURE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
NOMINATOR'S SIGNATURE	NOMINATOR'S SIGNATURE

C2 – Nomination Documents

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I do solemnly declare as follows:

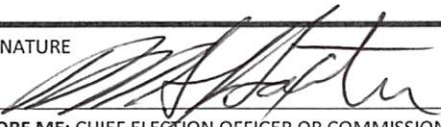
1. I am qualified under section 81 of the *Local Government Act* to be nominated, elected and to hold the office of

POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR)

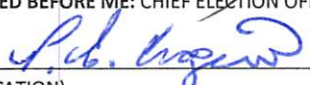
COUNCILLOR

2. I am or will be on general voting day for the election, 18 years of age or older.
3. I am a Canadian citizen.
4. I have been a resident of British Columbia, as determined in accordance with section 67 of the *Local Government Act*, for the past six months immediately preceding today's date.
5. I am not disqualified by the *Local Government Act* or any other enactment from being nominated for, being elected to or holding the office, or otherwise disqualified by law.
6. To the best of my knowledge, the information provided in these nomination documents is true.
7. I fully intend to accept the office if elected.
8. I am aware of and understand the requirements and restrictions of the *Local Elections Campaign Financing Act* and I intend to fully comply with those requirements and restrictions.

NOMINEE'S SIGNATURE



DECLARED BEFORE ME: CHIEF ELECTION OFFICER OR COMMISSIONER FOR TAKING AFFIDAVITS FOR BRITISH COLUMBIA



AT: (LOCATION)

Coxwood City Hall

DATE: (YYYY / MM / DD)

2018-09-07

☐

I am acting as my own Financial Agent

NOMINEE'S SIGNATURE

☒

I have appointed as my Financial Agent

LINDA MUNROE
FINANCIAL AGENT'S NAME (IF APPLICABLE)