

CANDIDATE NOMINATION PACKAGE


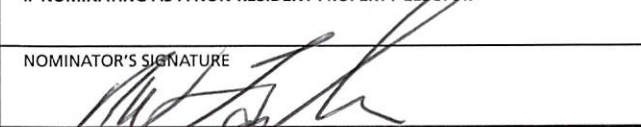
C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

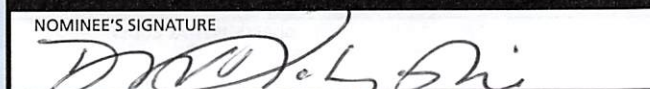
JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) CITY OF COLWOOD		ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) CITY OF COLWOOD	
We, the following electors of the above named jurisdiction, hereby nominate:			
NOMINEE'S LAST NAME KOBAYASHI		FIRST NAME DOUGLAS	MIDDLE NAME(S) NORMAN
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT DOUG KOBAYASHI			
RESIDENTIAL ADDRESS (STREET ADDRESS) 28-551 BEZANTON WAY		CITY/TOWN COLWOOD	POSTAL CODE V9C 0C5
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) CITY OF 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) Michael Leslie Reilly		NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Ken Taylor	
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 3362 Swindell Cres V9C 2G4		RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 3519 Promenade Cv.	
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 	

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) 2018/9/10

CANDIDATE NOMINATION PACKAGE

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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

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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
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NOMINATOR'S SIGNATURE	NOMINATOR'S SIGNATURE

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NOMINATOR'S SIGNATURE	NOMINATOR'S SIGNATURE

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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

[Handwritten Signature]

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

[Handwritten Signature]

AT: (LOCATION)

Loxwood City Hall

DATE: (YYYY / MM / DD)

2018-09-11

I am acting as my own Financial Agent

NOMINEE'S SIGNATURE

I have appointed as my Financial Agent

Michael Reilly

FINANCIAL AGENT'S NAME (IF APPLICABLE)