CANDIDATE NOMINATION PACKAGE

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) MUNCEIPALIFY	ELECTION AREA (E.G. MUNICIPALITY,	REGIONAL DISTRICT ELECTORAL AREA)		
We, the following electors of the above named jurisdiction, hereby nominate:				
NOMINEE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)		
PARKINSON	JAMES	EDWARD STEWAR		
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT				
Stewart Parkinson				
RESIDENTIAL ADDRESS (STREET ADDRESS)	CITY/TOWN .	POSTAL CODE		
406 - 3230 Selleck Way	Victoria	V9C DE6		
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS	CITY/TOWN	POSTAL CODE		
(STREET ADDRESS/PO BOX NUMBER)				
As a Candidate for the office of:				
POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR)	JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT)			
Councillor	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)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
JANIS DOBSON	LTLLA MARIE CORRIGALL
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
IF NOMINATING AS A RESIDENT ELECTOR	IF NOMINATING AS A RESIDENT ELECTOR
401-3230 SELLECK WAY, VICTORIA	205-3230 SELLECK WPY.
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	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) 2018/09/03

CANDIDATE NOMINATION PACKAGE		
NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	
CARLA DUCHAINE	70	
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 101-3230 Selleck Way	BARRY DUCHAINE RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 101-3230 Se (leck Way	
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	
Carla Duchaine	Balaxan	
NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	
LAURAINE CHALMERS	BARRY (HALMERS	
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	
NOMINATORSSIGNATURE	NOMINATOR'S SIGNATURE	
Allmers	auce	
NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	
CHRISTING STEPANIE TAIT	Alan Tohnston	
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 108-3234 HOLGATE LANE, VICTOR	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR IA MS Ships View Place	
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) VQC IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	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)	
BRUCE BLAIR THIT	GAYLE JOANNE JOHNSTON	
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR V90046 103-3234 HOLGATE LAME VICTORIA	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)	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR	
3114 LODO DAVE DD. (alwood 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	
fillorile fillia fortimut		

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CANDIDATE NOMINATION PACKAGE

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

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)	DATE: (YYYY / MM / DD)	
Coluded Crif HALL.	23.8-59-04	
I am acting as my own Financial Agent	I have appointed as my Financial Agent Len Wansbrough	
NOMINEE'S SIGNATURE	FINANCIAL AGENT'S NAME (IF APPLICABLE)	