

CANDIDATE NOMINATION PACKAGE

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

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| JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT) CITY OF PORT ALBERNI | | ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA) | |
| We, the following electors of the above-named jurisdiction, hereby nominate: | | | |
| NOMINEE'S LAST NAME PATTERSON | | FIRST NAME CHARLENE | MIDDLE NAME(S) ANNE |
| USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT CHAR PATTERSON | | | |
| RESIDENTIAL ADDRESS (STREET ADDRESS) 4815 ARGYLE ST. | | CITY/TOWN PORT ALBERNI | POSTAL CODE V9Y 1V9 |
| 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, ELECTORAL AREA DIRECTOR) COUNCILLOR | | JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT) PORT ALBERNI | |

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 voting in an election in British Columbia or from being nominated for, being elected to or holding the office or be otherwise disqualified by law.

A Nominator MUST be Qualified Under the *Local Government Act* or *Vancouver Charter* to Nominate a Nominee for Office

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| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) JOHN MAXWELL DOUGLAS | | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) GUY STEPHEN CICOVA | |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) [REDACTED] | | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR [REDACTED] | |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR PORT ALBERNI V9Y1B3 | | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR PORT ALBERNI | |
| NOMINATOR'S SIGNATURE [REDACTED] | | NOMINATOR'S SIGNATURE [REDACTED] | |

Please see over for additional space when more than two nominators (e.g., 10) are required. For local governments that require 25 nominators attach an additional sheet(s) as necessary.

| | |
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| I consent to the above nomination for office: | |
| NAME [REDACTED] | DATE: (YYYY/MM/DD) 2022/08/31 |

CANDIDATE NOMINATION PACKAGE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
KARL RICHARD KORVEN

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
 [REDACTED]

NOMINATOR'S SIGNATURE
 [REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Sheila Kathleen Carroll

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
 [REDACTED]

NOMINATOR'S SIGNATURE
 [REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
M. JOYCE EVANS

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
V9Y3A7

NOMINATOR'S SIGNATURE
 [REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
R. FRANKOW ROBERT

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
V9Y 9X6

NOMINATOR'S SIGNATURE
 [REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
 [REDACTED]

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
 [REDACTED]

NOMINATOR'S SIGNATURE
Derek Hanabury

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
BETTY WEBERT

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
 [REDACTED]

NOMINATOR'S SIGNATURE
 [REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
David Auld

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
 [REDACTED]

NOMINATOR'S SIGNATURE
 [REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
GERRY WEBERT

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
 [REDACTED]

NOMINATOR'S SIGNATURE
 [REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Gayle Stephen-Player

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
V9Y 7X5

NOMINATOR'S SIGNATURE
 [REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Sharie Marie Minions

RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A RESIDENT ELECTOR
 [REDACTED]

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)
 IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
 [REDACTED]

NOMINATOR'S SIGNATURE
 [REDACTED]

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, ELECTORAL AREA 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 voting in an election in British Columbia or from being nominated for, being elected to or holding the office, or be 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.

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| NOMINEE'S NAME [REDACTED] | |
| OFFICER OR COMMISSIONER FOR TAKING AFFIDAVITS FOR BRITISH COLUMBIA TWYLA SLOANSKI, CEO | |
| LOCATION PORT ALBERNI | DATE: (YYYY/MM/DD) 2022-09-07 |
| <input checked="" type="checkbox"/> I have appointed as my Financial Agent NOMINEE'S SIGNATURE [REDACTED] | <input type="checkbox"/> I have appointed as my Financial Agent FINANCIAL AGENT'S NAME (IF APPLICABLE) |