

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

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 Zanette	FIRST NAME Carol-Anne	MIDDLE NAME(S)
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT Carol-Anne Zanette		
RESIDENTIAL ADDRESS (STREET ADDRESS) [REDACTED]	CITY/TOWN Port Alberni	POSTAL CODE V9Y 8A3
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

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

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.

I consent to the above nomination for office:

NOMINEE'S SIGN [REDACTED]	DATE: (YYYY/MM/DD) 2022/09/06
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CANDIDATE NOMINATION PACKAGE

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

NOMINATOR'S SIGNATURE
[REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Theresa Louise Deakin

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 BC V9Y4C4

NOMINATOR'S SIGNATURE
[REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Bobby D Werner

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

NOMINATOR'S SIGNATURE
[REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Lauren Gibson

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

NOMINATOR'S SIGNATURE
[REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Steven Gregory Muise

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

NOMINATOR'S SIGNATURE
[REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Susan Waldie

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

NOMINATOR'S SIGNATURE
[REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Mary Anne Tourangeau

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 BC V9Y-6K4P

NOMINATOR'S SIGNATURE
[REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Tyler VanKooten

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

NOMINATOR'S SIGNATURE
[REDACTED]

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
ROBERT W. PHILLIPS

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

NOMINATOR'S SIGNATURE
Rw Phillips

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Abriel Gillian Mae Chadwick

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

NOMINATOR'S SIGNATURE
Abriel Chadwick

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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, ELECTORAL AREA DIRECTOR) <i>Councillor</i>
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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.

NOMINEE'S	[REDACTED]
DECLARED	[REDACTED] ING AFFIDAVITS FOR BRITISH COLUMBIA
AT (LOCATION)	<i>TWYLA SLONSKI, CEO</i>
	DATE: (YYYY/MM/DD) <i>2022/09/06</i>
	<i>PORT ALBERT</i>

<input checked="" type="checkbox"/> I am acting as my own Financial Agent [REDACTED]	<input type="checkbox"/> I have appointed as my Financial Agent FINANCIAL AGENT'S NAME (IF APPLICABLE)
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