

CANDIDATE NOMINATION PACKAGE



C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS


JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) CITY OF PORT ALBERNI		ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) CITY OF PORT ALBERNI	
We, the following electors of the above named jurisdiction, hereby nominate:			
NOMINEE'S LAST NAME ALEMAN Y		FIRST NAME CHRISTOPHER	MIDDLE NAME(S) JOSEPH
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT			
RESIDENTIAL ADDRESS (STREET ADDRESS) 3854 6th Ave		CITY/TOWN PORT ALBERNI	POSTAL CODE V9Y 4M2
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 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 being nominated for, being elected to or holding the office, or is not otherwise disqualified by law.


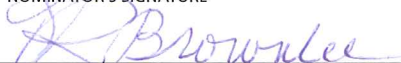
NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Theresa Marie Alemany	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Sharon C. Johnston
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 3854 6th Ave Port Alberni V9Y 4M2	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR PORT ALBERNI - 4598 North Cres V9Y 3B8
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) 2019/09/06



CANDIDATE NOMINATION PACKAGE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) CLIFF HENRIK JENSEN	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 PORT ALBERNI, 4598 North Cres V9V 3B8	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 3610 Estevan Drive
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 Port Alberni BC V9V5G9
NOMINATOR'S SIGNATURE 	NOMINATOR'S SIGNATURE 

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Robert John Eric Frolic	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) SAM BROWNLEE
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR Port Alberni, 2581 12th Ave V9V 5P4	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 4805 BURDE ST
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 PORT ALBERNI, V9V3C1
NOMINATOR'S SIGNATURE 	NOMINATOR'S SIGNATURE 

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) ROBERT NELSON POWELSON	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) BRENT KNOX
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 2902 16TH AVE, PORT ALBERNI V9V 3A7	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 4205 BURDE ST.
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 PORT ALBERNI - V9V3C1
NOMINATOR'S SIGNATURE 	NOMINATOR'S SIGNATURE 

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Bill Thomas Brown	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Rosina Marie Galbraith
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 4396 Michigan Rd. V9V 5Z2	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 5168 Gertrude St. V9V 6C2
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) ROSALIND CONNOR CHAPMAN	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Heather Thomson
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR PORT ALBERNI, 2354 ANDERSON AVE	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 4480 Alwyn St Port Alberni V9V 5B1
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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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

Dawnelle Hawthorn

AT: (LOCATION)

CITY HALL PORT ALBERT

DATE: (YYYY / MM / DD)

2018/09/06



I am acting as my own Financial Agent

NOMINEE'S SIGNATURE



I have appointed as my Financial Agent

FINANCIAL AGENT'S NAME (IF APPLICABLE)

2018 MUNICIPAL ELECTION

CITY OF PORT ALBERNI

CANDIDATE INFORMATION RELEASE AUTHORIZATION

Your nomination documents are available to the public to view as soon as they are submitted. Consent provided with this form simply allows the municipality to provide additional information, as appearing below, to the public and / or media.

The information you choose to share will be posted on websites operated by CivicInfo BC (www.civicinfo.bc.ca). This is the primary source through which the media, the public, provincial ministries, researchers, and others are able to obtain province-wide local election information.

I, CHRISTOPHER JOSEPH ALEMANY
(please print name of person nominated)

having submitted nomination documents for election to the office of COUNCILLOR, hereby give my consent to share the following information. This information may be shared by email, posting on a website, phone, fax, or by any other means of electronic communication.

Address:	
3854 6 th Ave Port Alberni B.C. V9Y 4M2	
Phone:	Alternate Phone (e.g. Cell):
250 731 7930	250 723 0889
Email:	
chris_alemany@portalberni.ca	
Website:	
www.chrisalemany.ca	
Twitter:	Facebook:
chrisalecanada	Councillor-Chris Alemany

Gender (Check one):

☐ Female ☒ Male ☐ Other / undisclosed

Previous Elected Experience (Check one):

- ☒ Incumbent. Served on Council *in the same role* between 2014 and 2018.
- ☐ Served on Council *different role* between 2014 and 2018.
- ☐ Served on council before 2014, but not during the past term.
- ☐ No council experience, but has been elected to office elsewhere (school, local, provincial, or federal).
- ☐ None.


(Signature of Candidate)

If you have questions about the information collected being on this form, please contact
CivicInfo BC at info@civicinfo.bc.ca, 250-383-4898.