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, R	ation by Protect Deposits and the Artist Art
We, the following electors of the above named jurisdiction, hereby nominate:		
NOMINEE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
ROBERTSON	GARY	EDWIN
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERE	RED BY THE PERSON NOMINATED TO APPE	AR ON THE BALLOT
RESIDENTIAL ADDRESS (STREET ADDRESS)	CITY/TOWN	POSTAL CODE
3184 11Th AUE	PORT ALBERNI	V94445
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)	JURISDICTION (E.G. MUNICIPALITY, REG	IONAL DISTRICT)
MAYOR	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)	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 are required. For local governments that require 25 nominators attach an additional sheet as necessary.

I consent to the above nomination for office:	
NOMINERS SIGNATURE	DATE: (YYYY / MM / DD)
Hart	2018/09/09
10	

CANDIDATE NOMINATION PACKAGE NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) 000000 ameron lichael 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 L th 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) STEVE GIBSON 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 NORTH CVESCENT 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) IF NOMINATING AS A RESIDENT ELECTOR RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR erne 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 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 IF NOMINATING AS A RESIDENT ELECTOR Bruce ses 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 IF NOMINATING AS A RESIDENT ELECTOR LYALL GOINT nderson

NOMINATOR'S SCHATURE

PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)

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

NOMINATOR'S SIGNATURE

CANDIDATE NOMINATION PACKAGE			
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	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	
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11	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	
1	Diana Kauleau	Fram Webster	
	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	/
	3288 witerform OR.	DODDENY ADDRESS (CITY/TOWN STREET ADDRESS DOSTAL CODE)	
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	NOMINATOR'S SIGNATURE	NOMINATOR'S SIGNATURE	
	Heart Barber	hamilable show	
	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MÍDDLE AND LAST NAMES)	
	Daniel Graham ENGEL	David Korths	
	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	J
	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 SIGNATURE	NOWINATURE	

CANDIDATE NOMINATION PACKAGE

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

I do solemnly declare as follows:			
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)			
MAYOR			
	I am or will be on general voting day for the election, 18 years of age or older.		
. I am a Canadian citizen.			
I. I have been a resident of British Columbia, as determined in accordance with section 67 of the <i>Local Government Act</i> , for the past six months immediately preceding today's date.			
	5. I am not disqualified by the <i>Local Government Act</i> 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 i	n 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 restr I intend to fully comply with those requirements and rest	rictions of the <i>Local Elections Campaign Financing Act</i> and rictions.		
DECLARED BEFORE ME: CHIEF ELECTION OFFICER OR COMMISSIONER FOR TAKING AFFIDAVITS FOR BRITISH COLUMBIA			
CITY HALL, PORTALBERUI	2018 /09/13		
I am acting as my own Financial Agent	I have appointed as my Financial Agent		
NOMINEE'S SIGNATURE			



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.

, GARY ROBALTSON	
(please print n	name of person nominated)
	ction to the office of, hereby give my nis information may be shared by email, posting on a website, ommunication.
Address:	
Phone:	Alternate Phone (e.g. Cell):
Email:	
ALIENSPORTS@1-	toTMAIL:com
Website:	
Twitter:	Facebook:
	"GARY ROBARSON 4 MAYOR
Gender (Check one):	
☐ Female ☐ Male ☐ Of	ther / undisclosed
Previous Elected Experience (Check one):	
\square Incumbent. Served on Council <i>in the same rol</i> e	<i>e</i> between 2014 and 2018.
☐ Served on Council <i>different role</i> between 2014	and 2018.
\square Served on council before 2014, but not during	the past term.
\square No council experience, but has been elected to	o office elsewhere (school, local, provincial, or federal).
□ None.	Hand
	(Signature of Candidate)

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

