


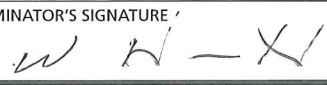
C2 – Nomination Documents

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 PATOLA		FIRST NAME TODD	MIDDLE NAME(S) GRANT
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT			
RESIDENTIAL ADDRESS (STREET ADDRESS) 4310 LATHAM Road		CITY/TOWN Port Alberni	POSTAL CODE V9Y 4E1
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER) 2750 Intern Road		CITY/TOWN Qualicum Beach	POSTAL CODE V9K 1Y2
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) JOHN MAXWELL DOUGLAS	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) WESLEY LES. LEWITT
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 2132 MOTION DRIVE P.A.	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 5510 WOODLAND CRES E.
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR V9Y 1B3	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR V9Y 8E6
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 / 08 / 27

CANDIDATE NOMINATION PACKAGE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Mark Kendall</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>MICHAEL CONOR CAMAN</i>
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>#52 4110 Kendall st.</i>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>5556 GRANDVIEW RD</i>
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>Port Alberni B.C. V941J5</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>PORT ALBERNI BC V948X7</i>
NOMINATOR'S SIGNATURE <i>[Signature]</i>	NOMINATOR'S SIGNATURE <i>[Signature]</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Mark Steven Zenko</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>GUY CLCON</i>
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>3768 Haslam Rd</i>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>5837 Compton RD.</i>
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>Port Alberni, BC</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>PORT ALBERNI, B.C. V947B7</i>
NOMINATOR'S SIGNATURE <i>[Signature]</i>	NOMINATOR'S SIGNATURE <i>[Signature]</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>MARK Hamilton Cairner</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Dave Swain</i>
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>4695 Glenside Crescent</i>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>5492 Woodland Cr. E</i>
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>PORT ALBERNI</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>PORT ALBERNI</i>
NOMINATOR'S SIGNATURE <i>[Signature]</i>	NOMINATOR'S SIGNATURE <i>[Signature]</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Tricia Ann Zenko</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>3768 Haslam Rd.</i>	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 <i>Port Alberni BC V946A4</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
NOMINATOR'S SIGNATURE <i>[Signature]</i>	NOMINATOR'S SIGNATURE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>GREGORY DEAN DOLLING</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>3593 HUFF DR.</i>	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 <i>PORT ALBERNI BC V944E8</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
NOMINATOR'S SIGNATURE <i>[Signature]</i>	NOMINATOR'S SIGNATURE

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

Dawn Hartwell

AT: (LOCATION)

CITY HALL, PORT ALBERT

DATE: (YYYY / MM / DD)

2018/09/05



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, TODD PATOLA
(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:	
<u>2750 Tintern Road Qualicum Beach BC</u>	
Phone:	Alternate Phone (e.g. Cell):
<u>/</u>	<u>/</u>
Email:	
<u>RCGINTL2@gmail.com</u>	
Website:	
<u>/</u>	
Twitter:	Facebook:
<u>/</u>	<u>/</u>

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]
(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.

ELECTION 2018