CANDIDATE NOMINATION PACKAGE

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT)	ELECTION AREA (E.G., MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AR
We, the following electors of the above named jurisc	liction, hereby nominate:
NOMINEE'S LAST NAME HACDANE	HERBERT PAUL
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND HERB HALDAN	PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT ${\cal E}$
3/18 C OHER Point Rd	Sooke V920K8
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)	DISTRICT OF SOOKE
Is or will be on general voting day for the election, Is a Canadian citizen. Has been a resident of British Columbia, as determ Government Act, for the past six months immediat	18 years of age or older. ined in accordance with section 67 of the <i>Local</i> ely preceding today's date.
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ROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
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OMINATOR'S SIGNATURE	NOMINATOR'S SIGNATURE

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C2 - Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

	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)		
	I am or will be on general voting day for the election, 18 years of age or older. I am a Canadian citizen.		
*			
	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.		
	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.		
	To the best of my knowledge, the information provided in these nomination documents is true. I fully intend to accept the office if elected.		
	I am aware of and understand the requirements and restrictions of the Local Elections Campaign Financiand I intend to fully comply with those requirements and restrictions.		
1	AT: (LOCATION) SOOKE	DATE: (YYYY/MM/DD) 2018/09/04	
	I am acting as my own financial Agent	I have appointed as my Financial Agent	
	NOMINEE'S SIGNATURE	FINANCIAL AGENT'S NAME (IF APPLICABLE)	
L	NOMINEE'S SIGNATURE	FINANCIAL AGENT'S NAME (IF APPLICABLE)	