

CANDIDATE NOMINATION PACKAGE



C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) MUNICIPALITY		ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) SOOKE	
We, the following electors of the above named jurisdiction, hereby nominate:			
NOMINEE'S LAST NAME PEARSON		FIRST NAME KEVIN	MIDDLE NAME(S) WILLIAM
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT			
RESIDENTIAL ADDRESS (STREET ADDRESS) 1930 MAPLE AVE		CITY/TOWN SOOKE	POSTAL CODE V92 0N9
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) MAYOR		JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) DISTRICT OF SOOKE	

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) ✓ William Edward Zisay	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) ✓ Bruce Logan
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 5650 Woodlark Rd V92 0G5	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 6915 11th West Coast Rd.
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) 0018/09/06
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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, DIRECTOR)

MAYOR

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

Kevin Pearson

DECLARED BEFORE ME: CHIEF ELECTION OFFICER OR COMMISSIONER FOR TAKING AFFIDAVITS FOR BRITISH COLUMBIA

C. Mushata

AT: (LOCATION)

Sooke, BC

DATE: (YYYY / MM / DD)

2018/09/06



I am acting as my own Financial Agent

Kevin Pearson

NOMINEE'S SIGNATURE



I have appointed as my Financial Agent

FINANCIAL AGENT'S NAME (IF APPLICABLE)

CANDIDATE NOMINATION PACKAGE

C3 – Other Information Provided by Candidate

PLEASE PRINT IN BLOCK LETTERS

Office for which individual is a nominee:

POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR)

MAYOR

JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT)

MUNICIPALITY

ELECTION AREA
(E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA)

SOOKE

NOMINEE'S LAST NAME

PEARSON

FIRST NAME

KEVIN

MIDDLE NAME(S)

WILLIAM

USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT

MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)
AS PROVIDED IN THE NOMINATION DOCUMENTS

1930 MAPLE AVE

CITY/TOWN

SOOKE

POSTAL CODE

V9Z 0N9

ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)

CITY/TOWN

POSTAL CODE

TELEPHONE NUMBER

250 642 5376

EMAIL ADDRESS (IF AVAILABLE)

KEVINW.PEARSON@SHAW.CA

Additional Addresses for Service Information

OPTIONAL

MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)
IF EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE

CITY/TOWN

POSTAL CODE

FAX NUMBER

EMAIL ADDRESS
IF MAILING ADDRESS WAS PROVIDED AS ADDRESS FOR SERVICE

NAME OF ELECTOR ORGANIZATION ENDORSING THE CANDIDATE (IF APPLICABLE)



I am acting as my own Financial Agent



I am not acting as my own Financial Agent

Please ensure that name and mailing address information is the same as that entered on FORM C2 – NOMINATION DOCUMENTS