C1 - Candidate Cover Sheet and Checklist Form

PLEASE PRINT IN BLOCK LETTERS

CANDIDATE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
NAME OF OFFICE FOR WHICH CANDIDATE IS SEEKING ELE	ECTION	
COUNCILLOR	·	
ECTION B		
		to the second se
his nomination package includes the f	ollowing completed forms, appoin	
	and this general rooms, appoint	iments, consents and declarations
C2 – Nomination Documents	enermig completed forms, appoin	tments, consents and declaration:
		tments, consents and declarations
C2 – Nomination DocumentsC3 – Other Information Provide		
C2 – Nomination DocumentsC3 – Other Information Provide	d by Candidate Financial Agent (if Candidate is no	
 C2 – Nomination Documents C3 – Other Information Provide C4 – Appointment of Candidate 	d by Candidate Financial Agent (if Candidate is no Official Agent (if applicable)	

Disclaimer: All attempts have been made to ensure the accuracy of the forms contained in the Candidate Nomination Package – however the forms are not a substitute for provincial legislation and/or regulations.

Please refer directly to the latest consolidation of provincial statutes at BC Laws (www.bclaws.ca) for applicable election-related provisions and requirements.

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) District of Stewart	election area (e.g. municipality, regional district electoral area) District of Stewart				
We, the following electors of the above named jurisdiction, hereby nominate:					
NOMINEE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)			
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT					
RESIDENTIAL ADDRESS (STREET ADDRESS)	CITY/TOWN	POSTAL CODE			
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, RI	-			
COUNCILLOR	District of Stewa	art			

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:	
NOMINEE'S SIGNATURE	DATE: (YYYY / MM / DD) .

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

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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		
AT: (LOCATION)	DATE: (YYYY / MM / DD)	
I am acting as my own Financial Agent	I have appointed as my Financial Agent	
NOMINEE'S SIGNATURE	FINANCIAL AGENT'S NAME (IF APPLICABLE)	

C3 – Other Information Provided by Candidate

PLEASE PRINT IN BLOCK LETTERS

COUNCILLOR	(E.G. MUNICIPALITY, REGIONAL DISTRICT)	(E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA)
	District of Stewart	District of Stews
NOMINEE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
JSUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PI	REFERRED BY THE PERSON NOMINATED TO APPE	AR ON THE BALLOT
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) AS PROVIDED IN THE NOMINATION DOCUMENTS	CITY/TOWN	POSTAL CODE
ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)	CITY/TOWN	POSTAL CODE
ELEPHONE NUMBER	EMAIL ADDRESS (IF AVAILABLE)	
Additional Addresses for Service Information		OPTIONA
IAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE	CITY/TOWN	POSTAL CODE
AX NUMBER	EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED A	S ADDRESS FOR SERVICE
, , , , , , , , , , , , , , , , , , ,		
AME OF ELECTOR ORGANIZATION ENDORSING THE CANDIDATE (IF APPLIC	CABLE)	
I am acting as my own Financial Agent	I am not acting as my	own Financial Agent

ORIGINAL – Local Jurisdiction
PLEASE KEEP A COPY FOR YOUR RECORDS

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

C4 – Appointment of Candidate Financial Agent

PLEASE PRINT IN BLOCK LETTERS

CANDIDATE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR)	JURISDICTION	ELECTION AREA
COLINCILLOD	(E.G. MUNICIPALITY, REGIONAL DISTRICT)	(E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA)
COUNCILLOR	District of Stewart	District of Stewa
I hereby appoint as my Financial Agent for the:		
GENERAL VOTING DATE: (YYYY / MM / DD)	General Local Election	By-election
FINANCIAL AGENT'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN	POSTAL CODE
TELEPHONE NUMBER	EMAIL ADDRESS (IF AVAILABLE)	
EFFECTIVE DATE OF APPOINTMENT: (YYYY / MM / DD)		
CANDIDATE'S SIGNATURE	DATE: (YYYY / MM / DD)	
I hereby consent to act as the Financial Agent for the ab	ove named Candidate for the:	
	THE RESIDENCE OF THE MENTAL PLANTAGE.	
GENERAL VOTING DATE: (YYYY / MM / DD)	General Local Election	У By-election
FINANCIAL AGENT ADDRESS FOR SERVICE	General Local	By-election POSTAL CODE
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)	General Local Election	POSTAL CODE
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) Additional Addresses for Service Information MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	General Local Election	POSTAL CODE
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) Additional Addresses for Service Information MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) F EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE	General Local Election CITY/TOWN	POSTAL CODE OPTIONA POSTAL CODE
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) Additional Addresses for Service Information MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) F EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE FAX NUMBER	General Local Election CITY/TOWN CITY/TOWN EMAIL ADDRESS	POSTAL CODE OPTIONA POSTAL CODE
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) Additional Addresses for Service Information MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) IF EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE FAX NUMBER FINANCIAL AGENT'S SIGNATURE	General Local Election CITY/TOWN CITY/TOWN EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED AS	POSTAL CODE OPTIONA POSTAL CODE
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) Additional Addresses for Service Information MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) F EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE FAX NUMBER	General Local Election CITY/TOWN CITY/TOWN EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED AS	POSTAL CODE OPTIONA POSTAL CODE
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) Additional Addresses for Service Information MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) F EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE FAX NUMBER	General Local Election CITY/TOWN CITY/TOWN EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED AS	POSTAL CODE OPTIONA POSTAL CODE
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) Additional Addresses for Service Information MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) F EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE FAX NUMBER	General Local Election CITY/TOWN CITY/TOWN EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED AS	POSTAL CODE OPTIONA POSTAL CODE

C5 – Appointment of Candidate Official Agent

PLEASE PRINT IN BLOCK LETTERS

CANDIDATE'S LAST NAME		FIRST NAME	MIDDLE NAME(S)
POSITION (E.G. MAYOR, COUNCILLOR,	DIRECTOR)	JURISDICTION (E.G. MUNICIPALITY, REGIONAL	ELECTION AREA
COUNCILLO	R	District of Stewart	(E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) District of Stewa
I hereby appoint as my Offic	cial Agent for the:		* 15 15 11 12
GENERAL VOTING DATE: (YYYY / MM /	/ DD)	General Local Election	By-election
OFFICIAL AGENT'S LAST NAME		FIRST NAME	MIDDLE NAME(S)
MAILING ADDRESS (STREET ADDRESS/P	O BOX NUMBER)	CITY/TOWN	POSTAL CODE
I hereby delegate to th	ne above named official a	gent the authority to appoint scruti	neers
CANDIDATE'S SIGNATURE		DATE: (YYYY/MM/DD)	
		,	

C6 – **Appointment of Candidate Scrutineer**

PLEASE PRINT IN BLOCK LETTERS

POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR) COUNCILLOR I hereby appoint as my Scrutineer for the: GENERAL VOTING DATE: (YYYY / MM / DD) SCRUTINEER'S LAST NAME MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) CANDIDATE'S SIGNATURE	JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) District of Stewart General Local Election FIRST NAME CITY/TOWN DATE: (YYYY / MM / DD)	ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) District of Stewa By-election MIDDLE NAME(S) POSTAL CODE
COUNCILLOR I hereby appoint as my Scrutineer for the: GENERAL VOTING DATE: (YYYY/MM/DD) SCRUTINEER'S LAST NAME MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	General Local Election FIRST NAME (E.G. MUNICIPALITY, REGIONAL DISTRICT) District of Stewart General Local Election FIRST NAME	(E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) District of Steward By-election MIDDLE NAME(S)
I hereby appoint as my Scrutineer for the: GENERAL VOTING DATE: (YYYY / MM / DD) SCRUTINEER'S LAST NAME MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	General Local Election FIRST NAME CITY/TOWN	District of Steward By-election MIDDLE NAME(S)
GENERAL VOTING DATE: (YYYY / MM / DD) SCRUTINEER'S LAST NAME MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	Election FIRST NAME CITY/TOWN	MIDDLE NAME(S)
SCRUTINEER'S LAST NAME MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	Election FIRST NAME CITY/TOWN	MIDDLE NAME(S)
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN	
		POSTAL CODE
CANDIDATE'S SIGNATURE	DATE: (YYYY / MM / DD)	
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Statement of Disclosure Financial Disclosure Act

You must complete a Statement of Disclosure form if you are:

- · a nominee for election to provincial or local government office*, as a school trustee or as a director of a francophone education authority
- · an elected local government official
- an elected school trustee, or a director of a francophone education authority
- an employee designated by a local government, a francophone education authority or the board of a school district
- a public employee designated by the Lieutenant Governor in Council
 - *("local government" includes municipalities, regional districts and the Islands Trust)

Who has access to the information on this form?

The Financial Disclosure Act requires you to disclose assets, liabilities and sources of income. Under section 6 (1) of the Act, statements of disclosure filed by nominees or municipal officials are available for public inspection during normal business hours. Statements filed by designated employees are not routinely available for public inspection. If you have questions about this form, please contact your solicitor or your political party's legal counsel.

What is a trustee? – s. 5 (2)

In the following questions the term "trustee" does not mean school trustee or Islands Trust trustee. Under the *Financial Disclosure Act* a trustee:

- holds a share in a corporation or an interest in land for your benefit, or is liable under the Income Tax Act (Canada) to pay income tax
 on income received on the share or land interest
- · has an agreement entitling him or her to acquire an interest in land for your benefit

Thas an agreement entitling film of her to acquire arm	nierest in land for your benefit
Person making disclosure:	me first & middle name(s)
Street, rural route, post office box:	
City:	Province: Postal Code:
Level of government that applies to you:	provincial O local government school board/francophone education authority
If sections do not provide eno	ough space, attach a separate sheet to continue.
Assets – S. 3 (a)	
List the name of each corporation in which you hold one	or more shares, including shares held by a trustee on your behalf:

Liabilities – s. 3 (e) List all creditors to whom you owe a debt. Do not include residential property debt (mortgage, lease or agreement for sale), money borrowed for household or personal living expenses, or any assets you hold in trust for another person: creditor's name(s) creditor's address(es) Income - s. 3 (b-d) List each of the businesses and organizations from which you receive financial remuneration for your services and identify your capacity as owner, part-owner, employee, trustee, partner or other (e.g. director of a company or society). Provincial nominees and designated employees must list all sources of income in the province. · Local government officials, school board officials, francophone education authority directors and designated employees must list only income sources within the regional district that includes the municipality, local trust area or school district for which the official is elected or nominated, or where the employee holds the designated position. name(s) of business(es)/organization(s) your capacity Real Property – s. 3 (f) List the legal description and address of all land in which you, or a trustee acting on your behalf, own an interest or have an agreement which entitles you to obtain an interest. Do not include your personal residence. Provincial nominees and designated employees must list all applicable land holdings in the province. Local government officials, school board officials, francophone education authority directors and designated employees must list only applicable land holdings within the regional district that includes the municipality, local trust area or school district for which the official is elected or nominated, or where the employee holds the designated position. legal description(s) address(es)

Corporate Assets - s. 5

Do you individually, or together with your spouse, child, brother, sister, mother or father, own shares in a corporation which total more than 30% of votes for electing directors? (Include shares held by a trustee on your behalf, but not shares you hold by way of security.) O no O yes

If yes, please list the following information below & continue on a separate sheet as necessary:

- · the name of each corporation and all of its subsidiaries
- in general terms, the type of business the corporation and its subsidiaries normally conduct
- a description and address of land in which the corporation, its subsidiaries or a trustee acting for the corporation, own an interest, or have an agreement entitling any of them to acquire an interest
- · a list of creditors of the corporation, including its subsidiaries. You need not include debts of less than \$5,000 payable in 90 days
- · a list of any other corporations in which the corporation, including its subsidiaries or trustees acting for them, holds one or more shares.

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nature of persol	i making disclosure			date		

Where to send this completed disclosure form:

Local government officials:

- ... to your local chief election officer
 - · with your nomination papers, and
- ... to the officer responsible for corporate administration
 - · between the 1st and 15th of January of each year you hold office, and
 - · by the 15th of the month after you leave office

School board trustees/ Francophone Education Authority directors:

- ... to the secretary treasurer or chief executive officer of the authority
 - · with your nomination papers, and
 - · between the 1st and 15th of January of each year you hold office, and
 - · by the 15th of the month after you leave office

Nominees for provincial office:

 with your nomination papers. If elected you will be advised of further disclosure requirements under the Members' Conflict of Interest Act

Designated Employees:

- ... to the appropriate disclosure clerk (local government officer responsible for corporate administration, secretary treasurer, or Clerk of the Legislative Assembly)
 - · by the 15th of the month you become a designated employee, and
 - · between the 1st and 15th of January of each year you are employed, and
 - · by the 15th of the month after you leave your position