C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)	ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA)
Regional District Bulkley Nechal	o Area F
We, the following electors of the above-named jurisdictio	
NOMINEE'S LAST NAME	FIRST NAME MIDDLE NAME(S)
Moon	Shirley Irene
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFER	RED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT
Shirley Moor	\cap
RESIDENTIAL ADDRESS (STREET ADDRESS)	CITY/TOWN POSTAL CODE
10114 Snell Rd W	Vanderhoof VDIISA2
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN POSTAL CODE
As a Candidate for the office of:	JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)
POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR)	JURISDICTION (NAME OF MUNICIPALITY OF REGIONAL DISTRICT)
Electoral Area Director	ROLKING NECHARD
Each of us affirms that to the best of our knowledge, the ab	pove-named person nominated for office:
1. Is or will be on general voting day for the election, 18 ye	
2. Is a Canadian citizen.	
3. Has been a resident of British Columbia, as determined in for the past six months immediately preceding today's determined in the past six months immediately preceding today's determined in the past six months immediately preceding today's determined in the past six months immediately preceding today's determined in the past six months immediately preceding today.	n accordance with section 67 of the Local Government Act, ate.
 Is not disqualified under the Local Government Act or ar Columbia or from being nominated for, being elected to 	ny other enactment from voting in an election in British or holding the office or be otherwise disqualified by law.
A Nominator MUST be Qualified Under the Local Governmen	nt Act or Vancouver Charter to Nominate a Nominee for Office
NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
ALEXANDER JOHN KULCHAR	AIVALY WILLAMS
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR VANDER HOSE	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR
3139 GIESBRECHT RD VOJ 3A2	IF NOMINATING AS A RESIDENT ELECTOR OCICL VOIZAZ
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
·	Du .
NOMINATORS SIGNATORE	NOMINATOR'S SIGNATURE
Clex Kulchen	0 10 17 17
Please see over for additional space when more to	han two nortinators (e.g., 10) are required. For local sattach an additional sheet(s) as necessary.
governments that require 25 nonmators	
I consent to the above nomination for office:	DATE: (YYYY/MM/DD)

CANDIDATE NOMINATION PACKAGE NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Nargaret 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 ZOV PROPERTY ADDRESS (CTY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR Vanderhoof Culder 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) 03.3A1 IF NOMINATING AS A RESIDENT ELECTOR ICKSON TO Vanclestoof RC 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 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) 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 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

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 <i>Local Government</i>	Act to be nominated, elected and to hold the office of
POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR)	yet to be normated, elected and to note the office of
Electoral Are	ea Driector
2. I am or will be on general voting day for the election, 18	
3. I am a Canadian citizen.	
 I have been a resident of British Columbia, as determined for the past six months immediately preceding today's da 	
I am not disqualified by the Local Government Act or any Columbia or from being nominated for, being elected to	
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 restriction intend to fully comply with those requirements and restriction.	rictions of the Local Elections Campaign Financing Act and rictions.
DECLARED BEFORE ME: CHIEF ELECTION OFFICER OR COMMISSIONER FOR TA	KING AFFIDAVITS FOR BRITISH COLUMBIA
AT: (LOCATION) Burns Lake, BC	DATE: (YYYY/MM/DD) 2022/09/09
I am acting as my own Financial Agent	I have appointed as my Financial Agent
NOMINEE'S SIGNATURE	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, ELECTORAL AREA DIRECTOR)	JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)	ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA)	
Electoral Area Director	BULK Lay Nechak	o F	
NOMINEE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)	
W00N	Shirley	Erene	
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFER	RED BY THE PERSON NOMINATED APPI	EAR ON THE BALLOT	
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) AS PROVIDED IN THE NOMINATION DOCUMENTS	CITY/TOWN	POSTAL CODE	
OIIH Snell Rd W	Vanderhoof	VOJ 3A2	
ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)	CITY/TOWN	POSTAL CODE	
TELEPHONE NUMBER	EMAIL ADDRESS (IF AVAILABLE)		
250567 0063	redmoonphwalb.com		
Additional Addresses for Service Information		OPTIONA	
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) IF EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE	CITY/TOWN	POSTAL CODE	
	EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED AS ADDRESS FOR SERVICE		
FAX NUMBER		AS ADDRESS FOR SERVICE	
FAX NUMBER NAME OF ELECTOR ORGANIZATION ENDORSING THE CANDIDATE (IF APPLICABL	IF MAILING ADDRESS WAS PROVIDED	AS ADDRESS FOR SERVICE	
FAX NUMBER NAME OF ELECTOR ORGANIZATION ENDORSING THE CANDIDATE (IF APPLICABLE)	IF MAILING ADDRESS WAS PROVIDED	AS ADDRESS FOR SERVICE	

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