

C2 – Nomination Documents



PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (NAME OF REGIONAL DISTRICT) THOMPSON NICOLA REGIONAL DISTRICT		ELECTION AREA (NAME OF REGIONAL DISTRICT ELECTORAL AREA) ELECTORAL AREA J	
We, the following electors of the above-named jurisdiction, hereby nominate:			
NOMINEE'S LAST NAME GRENIER		FIRST NAME MICHAEL	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) 6177 TRANS CANADA HWY WEST		CITY/TOWN CHERRY CREEK	POSTAL CODE V1S 2A2
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER) 6177 TRANS CANADA HWY WEST		CITY/TOWN KAMLOOPS	POSTAL CODE V1S 2A2
As a Candidate for the office of:			
POSITION (E.G. ELECTORAL AREA DIRECTOR) ELECTORAL AREA DIRECTOR		JURISDICTION (NAME OF REGIONAL DISTRICT) THOMPSON NICOLA REGIONAL DISTRICT	

Each of us affirms that to the best of our knowledge, the above-named person nominated for office:

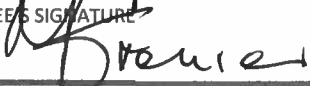
1. Is or will be on general voting day for the election, 18 years of age or older.
2. Is a Canadian citizen.
3. Has been a resident of British Columbia, as determined in accordance with section 67 of the *Local Government Act*, for the past six months immediately preceding today's date.
4. Is not disqualified under the *Local Government Act* or any other enactment from voting in an election in British Columbia or from being nominated for, being elected to or holding the office or be otherwise disqualified by law.

A Nominator MUST be Qualified under the *Local Government Act* to Nominate a Nominee for Office

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Jeremy Richard Tilburt	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Wynne F. Simms
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 6100 Buckhorn Rd	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR 7070 Savona Access Rd.
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR Kamloops BC V1S 2A1	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR Savona, BC V0K 2J0
NOMINATOR'S SIGNATURE 	NOMINATOR'S SIGNATURE 

Please see over for additional space when more than two nominators (e.g., 10) are required. For local governments that require 25 nominators attach an additional sheet(s) as necessary.

I consent to the above nomination for office:

NOMINEE'S SIGNATURE 	DATE: (YYYY/MM/DD) 2022/08/31
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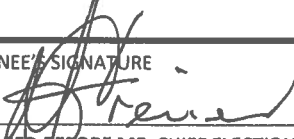
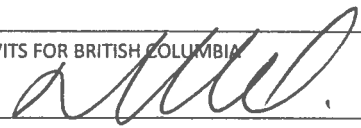
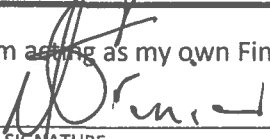
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I do solemnly declare as follows:

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. ELECTORAL AREA DIRECTOR) ELECTORAL AREA DIRECTOR
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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 voting in an election in British Columbia or from being nominated for, being elected to or holding the office, or be 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 Deanna Campbell CEO 	
AT: (LOCATION) Kamloops, BC	DATE: (YYYY/MM/DD) 2022/08/31
<input checked="" type="checkbox"/> I am acting as my own Financial Agent  NOMINEE'S SIGNATURE	<input type="checkbox"/> I have appointed as my Financial Agent _____ FINANCIAL AGENT'S NAME (IF APPLICABLE)

C3 – Other Information Provided by Candidate

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Office for which individual is a nominee:

POSITION (E.G. ELECTORAL AREA DIRECTOR) ELECTORAL AREA DIRECTOR	JURISDICTION (NAME OF REGIONAL DISTRICT) THOMPSON NICOLA REGIONAL DISTRICT	ELECTION AREA (NAME OF REGIONAL DISTRICT ELECTORAL AREA) ELECTORAL AREA J
NOMINEE'S LAST NAME GRENIER	FIRST NAME MICHAEL	MIDDLE NAME(S)
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 6177 TRANS CANADA HWY WEST	CITY/TOWN CHERRY CREEK	POSTAL CODE V1S 2A2
ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) 6177 TRANS CANADA HWY WEST	CITY/TOWN KAMLOOPS	POSTAL CODE V1S 2A2
TELEPHONE NUMBER 250-319-1321	EMAIL ADDRESS (IF AVAILABLE) mgdirect@mac.com	

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)

<input checked="" type="checkbox"/> I am acting as my own Financial Agent	<input type="checkbox"/> I am not acting as my own Financial Agent
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Please ensure that name and mailing address information is the same as that entered on FORM C2 – NOMINATION DOCUMENTS