

CANDIDATE NOMINATION PACKAGE

**C2 – Nomination Documents**



PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (NAME OF REGIONAL DISTRICT) <b>TNRD</b>		ELECTION AREA (NAME OF REGIONAL DISTRICT ELECTORAL AREA) <b>J</b>	
We, the following electors of the above-named jurisdiction, hereby nominate:			
NOMINEE'S LAST NAME <b>Lebourdais</b>		FIRST NAME <b>Corine</b>	MIDDLE NAME(S) <b>Margarette</b>
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT			
RESIDENTIAL ADDRESS (STREET ADDRESS) <b>5096 LAZY ACRES RD</b>		CITY/TOWN <b>KAMLOOPS</b>	POSTAL CODE <b>V2S 2A6</b>
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER) <b>Box 3219</b>		CITY/TOWN <b>Kamloops</b>	POSTAL CODE <b>V2C 6B8</b>
As a Candidate for the office of:			
POSITION (E.G. ELECTORAL AREA DIRECTOR) <b>Electoral Area Director</b>		JURISDICTION (NAME OF REGIONAL DISTRICT) <b>J</b>	

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) <b>Wilana Jean Collins</b>		NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <b>Robin Jean Collins</b>	
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <b>5944 Gardi Rd, Kamloops, BC V1S 2A1</b>		RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <b>5944 Gardi Rd Kamloops BC V1S 2A1</b>	
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 (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 <b>Corine Lebourdais</b>		DATE: (YYYY/MM/DD) <b>Sept 09/22</b>	
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## C2 – Nomination Documents

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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

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

Corinne Lebourdais

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

Deanna Campbell CEO

*[Signature]*

AT: (LOCATION)

Kamloops, BC

DATE: (YYYY/MM/DD)

2022/09/09

I am acting as my own Financial Agent

Corinne Lebourdais

NOMINEE'S SIGNATURE

I have appointed as my Financial Agent

FINANCIAL AGENT'S NAME (IF APPLICABLE)