CANDIDATE NOMINATION PACKAGE - SCHOOL TRUSTEE

CS2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (NAME OF SCHOOL DISTRICT) SD 69	TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE)	
We, the following electors of the above-named trustee e	electoral area, hereby nominate:	
NOMINEE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
Pendergast	Garry	Roy
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFI	ERRED BY THE PERSON NOMINATED TO APPI	EAR ON THE BALLOT
RESIDENTIAL ADDRESS (STREET ADDRESS)	CITY/TOWN	POSTAL CODE
830 Retegno Avenue	Parksville	V9P0C3
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN	POSTAL CODE
As a Candidate for the office of:		
BOARD OF EDUCATION TRUSTEE	JURISDICTION (NAME OF SCHOOL DISTRICT) SD 69	TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE)
 Has been a resident of British Columbia, as determined for at least six months immediately preceding today's d Is not disqualified under the School Act or any other en 	ate. actment from being nominated	
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DMINATOR'S SIGNATURE	NOMINATOR'S SIGNATURE	

CS2 – Nomination Documents

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I do solemnly declare as follows:

1. I am qualified under section 32 of the School Act to be nominated, elected and to hold the office of

POSITION

BOARD OF EDUCATION TRUSTEE

- 2. I am or will be on general voting day for the election, age 18 or older.
- 3. I am a Canadian citizen.
- 4. I have been a resident of British Columbia, as determined in accordance with section 42 of the *School Act*, for at least six months immediately preceding today's date.
- 5. I am not disqualified by the *School Act* or any other enactment from being nominated for, being elected to or holding office as a trustee, 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 intend to fully comply with those requirements and restrictions.

DECLARED BEFORE ME: CHIEF ELECTION OFFICER OR COMMISSIONER FOR AT: (LOCATION)	De party (E) . Date: (VYYY/MM/DD)
Parksville, BC.	2022/08/30.
I am acting as my own Financial Agent NOMINEE'S SIGNATURE	I have appointed as my Financial Agent FINANCIAL AGENT'S NAME (IF APPLICABLE)
<u>J</u>	(INANGAL AGENT STRAWE (IF AFFEICABLE)