

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

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., MAYOR, COUNCILLOR, DIRECTOR)

~~MAYOR~~ MAYOR

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)

CACHE CREEK

DATE: (YYYY / MM / DD)

2018/09/14

I am acting as my own Financial Agent

NOMINEE'S SIGNATURE

I have appointed as my Financial Agent

FINANCIAL AGENT'S NAME (IF APPLICABLE)

CANDIDATE NOMINATION PACKAGE

C3 – Other Information Provided by Candidate

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Office for which individual is a nominee:

POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR) MAYOR	JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) CACHE CREEK	ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) CACHE CREEK
NOMINEE'S LAST NAME MURDOCK	FIRST NAME SEAN	MIDDLE NAME(S) PATRICK
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 1395 Highway 97, Box 487	CITY/TOWN CACHE CREEK	POSTAL CODE V0K 1H0
ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) seanmurdock@gmail.com	CITY/TOWN CACHE CREEK	POSTAL CODE V0K 1H0
TELEPHONE NUMBER 250-457-9693	EMAIL ADDRESS (IF AVAILABLE)	

Additional Addresses for Service Information

OPTIONAL

MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) IF EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE Box 487	CITY/TOWN CACHE CREEK	POSTAL CODE V0K 1H0
FAX NUMBER	EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED AS ADDRESS FOR SERVICE	

NAME OF ELECTOR ORGANIZATION ENDORSING THE CANDIDATE (IF APPLICABLE)



I am acting as my own Financial Agent



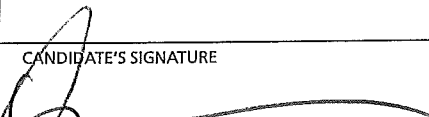
I am not acting as my own Financial Agent

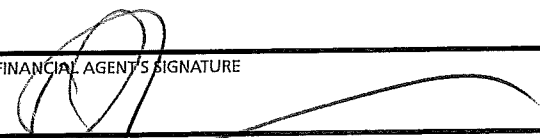
Please ensure that name and mailing address information is the same as that entered on FORM C2 – NOMINATION DOCUMENTS

CANDIDATE NOMINATION PACKAGE

C4 – Appointment of Candidate Financial Agent

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CANDIDATE'S LAST NAME MURROCK	FIRST NAME SEAN	MIDDLE NAME(S) PATRICK
POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR) MAYOR	JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) CADLE CREEK	ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) CADLE CREEK
I hereby appoint as my Financial Agent for the:		
GENERAL VOTING DATE: (YYYY / MM / DD) 2018 / 10 / 20	<input checked="" type="checkbox"/> General Local Election	<input type="checkbox"/> By-election
FINANCIAL AGENT'S LAST NAME MURROCK	FIRST NAME SEAN	MIDDLE NAME(S) PATRICK
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) 1395 Highway 97	CITY/TOWN CADLE CREEK	POSTAL CODE V0K 1H0
TELEPHONE NUMBER 250-457-9693	EMAIL ADDRESS (IF AVAILABLE) SEAN.MURROCK@gmail.com	
EFFECTIVE DATE OF APPOINTMENT: (YYYY / MM / DD)		
CANDIDATE'S SIGNATURE 	DATE: (YYYY / MM / DD) 2018 / 09 / 13	

I hereby consent to act as the Financial Agent for the above named Candidate for the:		
GENERAL VOTING DATE: (YYYY / MM / DD) 2018 / 10 / 20	<input checked="" type="checkbox"/> General Local Election	<input type="checkbox"/> By-election
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) 1397 Highway 97	CITY/TOWN CADLE CREEK	POSTAL CODE V0K 1H0
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	
FINANCIAL AGENT'S SIGNATURE 	DATE: (YYYY / MM / DD) 2018 / 09 / 13	