

In the matter of the By-election of the Yale First Nation, held according to the *Yale First Nation Custom Code*

I, _____ solemnly declare that:

(Please print your name)

1. I am a member of the _____ First Nation.
2. My band/treaty/registry/status number is _____ and/or my date of birth is _____.
3. My current mailing address is: _____
(Street number and name or P.O. Box)

(First Nation/Municipality) (Province/Territory) (Postal code)

4. I am at least 16 years of age.

5. I do not know of any reason why I would be disqualified from voting at this election.

I make this solemn declaration conscientiously believing it to be true and knowing that it has the same force and effect as if made under oath. I understand that it is an offence to make a false statement in this declaration.

Signature of Elector

Date

WITNESS DECLARATION (to be filled out by any person who is at least 18 years old)

Declared before me _____ at _____
(name) (municipality)

this _____ day of _____ 20____.
(date) (month) (year)

Signature of Witness

Note: This signature does not constitute the witness as a seconder to this nomination.

Address: _____
(Street number and name or P.O. Box)

(First Nation/Municipality) (Province) (Postal code)

Telephone Number of Witness: (____) ____ - _____

Mail-In Nomination Form

I, _____, Band # _____
(Please print name)

of the _____ hereby nominate
(Name of First Nation)

(Name of nominee)

of the _____
(Name of First Nation)

for the position of **COUNCILLOR**

NOMINEE FOR CANDIDATE INFORMATION

Address First Nation/Municipality Province/Territory Postal code

E-mail, if applicable (____) _____ - _____
Telephone Number

NOMINATOR INFORMATION

Address First Nation/Municipality Province/Territory Postal code

E-mail, if applicable (____) _____ - _____
Telephone Number

Signature Date

It is important that your telephone number and address be included above in case the Electoral Officer needs to contact you for clarification regarding the name of the individual that you are nominating.

