

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT) <i>City of West Kelowna</i>		ELECTION AREA (NAME OF MUNICIPALITY, NEIGHBOURHOOD CONSTITUENCY, OR REGIONAL DISTRICT ELECTORAL AREA)	
We, the following electors of the above-named jurisdiction, hereby nominate:			
NOMINEE'S LAST NAME <i>DA SILVA</i>	FIRST NAME <i>TASHA</i>	MIDDLE NAME(S) <i>ANN</i>	
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT			
	CITY/TOWN <i>West Kelowna</i>		
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN	POSTAL CODE	
As a Candidate for the office of:			
POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR) <i>COUNCILLOR</i>		JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT) <i>West Kelowna</i>	

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 a qualified elector of the municipality or electoral area (or neighbourhood constituency, if applicable) where the candidate is running. Elector qualifications are listed in section 65 & 66 of the *Local Government Act* and section 23 & 24 of the *Vancouver Charter*.

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Olivia Leanne Da Silva - Moore</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>GORDON THOMAS MILSON</i>
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Please see over for additional space when more than two nominators are required. Copies can be made as needed.

I consent to the above nomination for office:

NOMINEE'S SIGNATURE 	DATE: (YYYY/MM/DD) <i>2026/09/08</i>
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CANDIDATE NOMINATION PACKAGE

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NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

Shannon Elizabeth Powell

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

GARRETT ROSS MILLSAP

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

Wilhelmina E.M. Findlater

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

Kimberly Anne Millsap

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

Isaac Alexander Doug Findlater

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NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

STEPHANIE PAGE OLIVER.

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

HENRY BEESLEY

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

John Bruce Dalrymple

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

DAS KANDOLA

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

Jeffrey Lawrence Hayes

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NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Carol Aileen Zanon</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>JOHN MARTIN</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Olivia Valerie Lawson</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Elisabeth Reicher-Goss</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>KAWARJIT SINGH TUMBER</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Robert Ian Munro</i>

CANDIDATE NOMINATION PACKAGE

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NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

Kathleen Hogan (London)

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

M. Rita Hogan

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)

Colleen P. Whaffam

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NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) RICHARD ALFRED WILLIAMSON	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) SILVIA MARIE SPACEK

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Kelly Anne Hills	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) MELISSA ANNE GRASSMICK

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Ryan James Grassmick	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) SCOTT ALLEN MILLAR

CANDIDATE NOMINATION PACKAGE

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NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
WILMA IRENE MILLAR	Julie Danielle Prinsie

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Robert William Prinsie	Ivy Belle Marie Aspin

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)
Jaron Robert Friesen	

	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR
	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR
	☐ BY CHECKING THIS BOX YOU CONFIRM THAT YOU ARE A QUALIFIED ELECTOR IN THE JURISDICTION THE CANDIDATE IS RUNNING FOR OFFICE
	NOMINATOR'S SIGNATURE

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, ELECTORAL AREA DIRECTOR)

COUNCILLOR

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

AT: (LOCATION)

West Kelowna

DATE: (YYYY/MM/DD)

2026/09/08



I am acting as my own Financial Agent

NOMINEE'S SIGNATURE



I have appointed as my Financial Agent

FINANCIAL AGENT'S NAME (IF APPLICABLE)

ELECTOR ORGANIZATION CANDIDATE ENDORSEMENT AND CONSENT

NAME OF ELECTOR ORGANIZATION (AS REGISTERED WITH ELECTIONS BC):

PRINCIPLE OFFICIAL'S LAST NAME

FIRST NAME

MIDDLE NAME(S)

The above-named Elector Organization Agrees to Endorse:

CANDIDATE'S LAST NAME

DA SILVA

FIRST NAME

TASHA

MIDDLE NAME(S)

ANN

PRINCIPLE OFFICIAL'S SIGNATURE

DATE: (YYYY/MM/DD)

I consent to the endorsement by the above-named Elector Organization

CANDIDATE'S SIGNATURE

DATE: (YYYY/MM/DD)