

# NOMINATION FORM

As per Section 8 & 12

Councillor **Port au Port** Electoral Ward

We the undersigned electors as defined by the Custom Rules being eligible to vote in the

**Port au Port** Electoral Ward, nominate \_\_\_\_\_  
(Print as it is to appear on Ballot) Surname Given

Band Reg #: 034 Ward: \_\_\_\_\_

	Name of Elector	Signature of Elector	Address of Elector
Elector 1	_____	034	_____
	Surname	Band Reg #	
	_____	Ward	
	Given	Signature	
Elector 2	_____	034	_____
	Surname	Band Reg #	
	_____	Ward	
	Given	Signature	

I \_\_\_\_\_, nominated as above, consent to the nomination and give notice that I have been an ordinarily resident in the Electoral Ward of **Port au Port** for a full six-month period to the date set for the close of Nomination.

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_ Email Address: \_\_\_\_\_  
\_\_\_\_\_

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2024.

Signed by candidate in the presence of:

\_\_\_\_\_  
Candidate

\_\_\_\_\_  
Witness

**Must be returned and in the possession of Qalipu First Nation, 3 Church Street, Corner Brook, NL A2H 2Z4  
No later than October 2nd, 2024, at 12:00pm. Be sure to include the \$25.00 fee with this form, either by certified cheque,  
money order, bank draft, or cash.**

**Electoral Officer: Reisha Knott, 709-486-2427, rknott@qalipu.ca**