

C1 – Candidate Cover Sheet and Checklist Form

PLEASE PRINT IN BLOCK LETTERS

SECTION A

CANDIDATE'S LAST NAME <i>CALLIQU</i>	FIRST NAME <i>RONALD</i>	MIDDLE NAME(S) <i>REIAL</i>
NAME OF OFFICE FOR WHICH CANDIDATE IS SEEKING ELECTION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR) <i>COUNCILLOR</i>		

SECTION B

This nomination package includes the following completed forms, appointments, consents and declarations:

- ~~C2~~ – Nomination Documents –
- ~~C3~~ – Other Information Provided by Candidate
- C4 – Appointment of Candidate Financial Agent (if Candidate is not acting as own Financial Agent) –
- C5 – Appointment of Candidate Official Agent (if applicable) –
- C6 – Appointment of Candidate Scrutineer (if applicable)
- Statement of Disclosure: *Financial Disclosure Act* (required under the *Financial Disclosure Act*)

Release form.

Disclaimer: All attempts have been made to ensure the accuracy of the forms contained in the Candidate Nomination Package; however, the forms are not a substitute for provincial legislation and/or regulations.

Please refer directly to the latest consolidation of provincial statutes at BC Laws (www.bclaws.ca) for applicable election-related provisions and requirements.

C2 – Nomination Documents

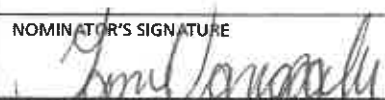

PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT) WHITE ROCK		ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA) WHITE ROCK	
We, the following electors of the above-named jurisdiction, hereby nominate:			
NOMINEE'S LAST NAME CALLIOW		FIRST NAME RONALD	MIDDLE NAME(S) REIAL
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT RON CALLIOW			
RESIDENTIAL ADDRESS (STREET ADDRESS)		CITY/TOWN WHITE ROCK	POSTAL CODE
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER) N/A		CITY/TOWN	POSTAL CODE
As a Candidate for the office of:			
POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR) COUNCILLOR		JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT) WHITE ROCK	

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 Qualified Under the Local Government Act or Vancouver Charter to Nominate a Nominee for Office

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Tami Michelle-Lynn Vangaalen		NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Ryan Kristopher Vangaalen	
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR White Rock		RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR White Rock	
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR		PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR	
NOMINATOR'S SIGNATURE 		NOMINATOR'S SIGNATURE 	

Please see over for additional space when more than two nominators (e.g., 10) are required. For local governments that require 25 nominators attach an additional sheet(s) as necessary.

I consent to the above nomination for office:	
NOMINEE'S SIGNATURE 	DATE: (YYYY/MM/DD) 2022/09/08

CANDIDATE NOMINATION PACKAGE

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>ISLA HAYNES</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>AL PAQUETTE</i>
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>White Rock</i>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>WHITE ROCK</i>
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>N/A</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>N/A</i>
NOMINATOR'S SIGNATURE <i>Isa Haynes</i>	NOMINATOR'S SIGNATURE <i>Al Paquette</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>KEN JOHNSTON</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>DAVE DICKINSON</i>
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>WHITE ROCK</i>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>WHITE ROCK</i>
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>White Rock</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>White Rock</i>
NOMINATOR'S SIGNATURE <i>Ken Johnston</i>	NOMINATOR'S SIGNATURE <i>Dave Dickinson</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>BARBARA JOHNSTON</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Madeleine Gail Cooney</i>
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>White Rock B.C.</i>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>White Rock B.C.</i>
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>White Rock B.C.</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>White Rock B.C.</i>
NOMINATOR'S SIGNATURE <i>Barbara Johnston</i>	NOMINATOR'S SIGNATURE <i>M. Cooney</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>KIRK BRIDGER</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Alisa Bridger</i>
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>White Rock BC</i>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>White Rod BC</i>
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>White Rock BC</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>White Rod BC</i>
NOMINATOR'S SIGNATURE <i>Kirk Bridger</i>	NOMINATOR'S SIGNATURE <i>Alisa Bridger</i>

NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Wayne Douglas Randall</i>	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Rocio Susana RANDALL</i>
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>White Rock BC</i>	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>White Rock BC</i>
PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>White Rock BC</i>	PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR <i>White Rock BC</i>
NOMINATOR'S SIGNATURE <i>Wayne Randall</i>	NOMINATOR'S SIGNATURE <i>Rocio Randall</i>

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
 Wally Arthur, Director
 Corporate Administration, City of White Rock
 A Commissioner for taking Affidavits
 in the Province of British Columbia
 15322 Buena Vista Avenue
 White Rock, BC V4B 1Y6 / (604) 541 2129

AT: (LOCATION)

White Rock, BC

DATE: (YYYY/MM/DD)

Sept 9, 2018

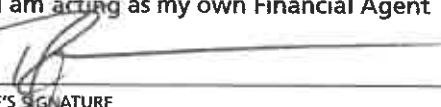


I am acting as my own Financial Agent



I have appointed as my Financial Agent

NOMINEE'S SIGNATURE



FINANCIAL AGENT'S NAME (IF APPLICABLE)

C3 – Other Information Provided by Candidate

PLEASE PRINT IN BLOCK LETTERS

Office for which individual is a nominee:

POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR) COUNCILLOR	JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT) White Rock	ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA) White Rock
NOMINEE'S LAST NAME CALLIOW	FIRST NAME RONALD	MIDDLE NAME(S) REIAL
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT RON CALLIOW		
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) AS PROVIDED IN THE NOMINATION DOCUMENTS	CITY/TOWN White Rock	POSTAL CODE
ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)	CITY/TOWN	POSTAL CODE
TELEPHONE NUMBER # 604-200-8189	EMAIL ADDRESS (IF AVAILABLE) ron@roncalliou.com	

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	

NAME OF ELECTOR ORGANIZATION ENDORSING THE CANDIDATE (IF APPLICABLE)

NA



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

Liabilities – s. 3 (e)

List all creditors to whom you owe a debt. Do not include residential property debt (mortgage, lease or agreement for sale), money borrowed for household or personal living expenses, or any assets you hold in trust for another person:

<i>creditor's name(s)</i>	<i>creditor's address(es)</i>
BMO MASTERCARD	100 KING ST WEST TORONTO ON M5X1A1

Income – s. 3 (b-d)

List each of the businesses and organizations from which you receive financial remuneration for your services and identify your capacity as owner, part-owner, employee, trustee, partner or other (e.g. director of a company or society).

- Provincial nominees and designated employees must list all sources of income in the province.
- Local government officials, school board officials, francophone education authority directors and designated employees must list only income sources within the regional district that includes the municipality, local trust area or school district for which the official is elected or nominated, or where the employee holds the designated position.

<i>your capacity</i>	<i>name(s) of business(es)/organization(s)</i>
IT OPERATIONS MANAGER	NEXII BUILDING SOLUTIONS

Real Property – s. 3 (f)

List the legal description and address of all land in which you, or a trustee acting on your behalf, own an interest or have an agreement which entitles you to obtain an interest. Do not include your personal residence.

- Provincial nominees and designated employees must list all applicable land holdings in the province.
- Local government officials, school board officials, francophone education authority directors and designated employees must list only applicable land holdings within the regional district that includes the municipality, local trust area or school district for which the official is elected or nominated, or where the employee holds the designated position.

<i>legal description(s)</i>	<i>address(es)</i>
N/A	

Corporate Assets – s. 5

Do you individually, or together with your spouse, child, brother, sister, mother or father, own shares in a corporation which total more than 30% of votes for electing directors? (Include shares held by a trustee on your behalf, but not shares you hold by way of security.)

no yes

If yes, please list the following information below & continue on a separate sheet as necessary:

- the name of each corporation and all of its subsidiaries
- in general terms, the type of business the corporation and its subsidiaries normally conduct
- a description and address of land in which the corporation, its subsidiaries or a trustee acting for the corporation, own an interest, or have an agreement entitling any of them to acquire an interest
- a list of creditors of the corporation, including its subsidiaries. You need not include debts of less than \$5,000 payable in 90 days
- a list of any other corporations in which the corporation, including its subsidiaries or trustees acting for them, holds one or more shares.


signature of person making disclosure

SEPT 08 2022
date

Where to send this completed disclosure form:

Local government officials:

... to your local chief election officer

- with your nomination papers, and

... to the officer responsible for corporate administration

- between the 1st and 15th of January of each year you hold office, and
- by the 15th of the month after you leave office

School board trustees/ Francophone Education Authority directors:

... to the secretary treasurer or chief executive officer of the authority

- with your nomination papers, and
- between the 1st and 15th of January of each year you hold office, and
- by the 15th of the month after you leave office

Nominees for provincial office:

- with your nomination papers. If elected you will be advised of further disclosure requirements under the *Members' Conflict of Interest Act*

Designated Employees:

... to the appropriate disclosure clerk (local government officer responsible for corporate administration, secretary treasurer, or Clerk of the Legislative Assembly)

- by the 15th of the month you become a designated employee, and
- between the 1st and 15th of January of each year you are employed, and
- by the 15th of the month after you leave your position