C5 – Appointment of Candidate Official Agent

PLEASE PRINT IN BLOCK LETTERS

CANDIDATE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR)	JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT)	ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA)

I hereby appoint as my Official Agent for the:

GENERAL VOTING DATE: (YYYY / MM / DD)	☐ General Local Election	☐ By-election
OFFICIAL AGENT'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN	POSTAL CODE

☐ I hereby delegate to the above named official agent the authority to appoint scrutineers

CANDIDATE'S SIGNATURE	DATE: (YYYY / MM / DD)