

**TSARTLIP FIRST NATION**  
**Mail-in Voter Declaration to Nominate Candidates**

In the matter of the election of the Tsartlip First Nation, held according to the *First Nations*

*Election Regulations*, I, \_\_\_\_\_ solemnly declare that:  
(Please print your name)

1. I am a member of the Tsartlip 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 18 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 \_\_\_\_\_  
(Print name of witness)                      (Town, City, municipality)

this \_\_\_\_\_ day of \_\_\_\_\_ 2021.  
(date)                      (month)

\_\_\_\_\_  
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: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_