

ST. JOHN'S	OCC – Nomination Form	Office of the City Clerk
	Nomination Form	

Declaration (to be completed by the Applicant)	SECTION 1
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We, _____ and _____
 (Proposer) (Second)

being eligible to vote in the City of St. John's, nominate:

_____ of _____
 (Candidate's Name) (Civic Address)

as a candidate for the elective office of:

Mayor
 Deputy Mayor
 Councillor-at-Large
 Councillor – Ward _____

Proposer's Signature _____ Seconders's Signature _____

I, _____ verify qualification and accept this nomination.
 (Candidate's Name – as will appear on a ballot)

Declared before me at St. John's, NL, this _____ day of _____, 20_____

Candidate's Signature _____

Returning Officer's Signature _____

Privacy Notice	SECTION 2
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Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed for the purpose of nominating a candidate. Questions about the collection and use of the information may be directed to the Election Coordinator, election@stjohns.ca.

This form must be accompanied by receipt of payment for the non-refundable \$50 fee, payable at Access St. John's.

Please submit completed form and receipt of payment in person to:	Office of the City Clerk 4 th Floor City Hall 10 New Gower Street St. John's, NL	For further information: Call: 709-754-2489 Email: election@stjohns.ca
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