

**C1 – Candidate Cover Sheet and Checklist Form**

PLEASE PRINT IN BLOCK LETTERS

**SECTION A**

|  |                                  |                                |
|--|----------------------------------|--------------------------------|
| CANDIDATE'S LAST NAME<br><b>SHAW</b>   | FIRST NAME<br><b>CHRISTOPHER</b> | MIDDLE NAME(S)<br><b>ARIEL</b> |
| NAME OF OFFICE FOR WHICH CANDIDATE IS SEEKING ELECTION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR)<br><b>COUNCILLOR</b> |                                  |                                |

**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*)**

**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](http://www.bclaws.ca)) for applicable election-related provisions and requirements

CANDIDATE NOMINATION PACKAGE

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

|   |  |
|---|--|
| JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)<br><b>NORTH COWICHAN</b> | ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA) |
|---|--|

We, the following electors of the above-named jurisdiction, hereby nominate:

|  |                                  |                                |
|--|----------------------------------|--------------------------------|
| NOMINEE'S LAST NAME<br><b>SHAW</b>   | FIRST NAME<br><b>CHRISTOPHER</b> | MIDDLE NAME(S)<br><b>ARIEL</b> |
| USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT             |                                  |                                |
| RESIDENTIAL ADDRESS (STREET ADDRESS)<br><b>1765 Cowichan Bay Rd</b>  | CITY/TOWN<br><b>COWICHAN BAY</b> | POSTAL CODE<br><b>VOR1N0</b>   |
| MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER)<br><b>P.O. Box 186<br/>3559 Garland Ave</b> | CITY/TOWN<br><b>COBBLE HILL</b>  | POSTAL CODE<br><b>VOR1L0</b>   |



As a Candidate for the office of:

|  |   |
|--|---|
| POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR)<br><b>COUNCILLOR</b> | JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)<br><b>NORTH COWICHAN</b> |
|--|---|

Each of us affirms that to the best of our knowledge, the above-named person nominated for office:

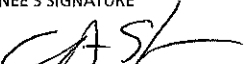
1. Is or will be on general voting day for the election, 18 years of age or older.
2. Is a Canadian citizen.
3. Has been a resident of British Columbia, as determined in accordance with section 67 of the *Local Government Act*, for the past six months immediately preceding today's date.
4. Is not disqualified 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)<br><b>William Donal Woollam</b>  | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)<br><b>Veronica Cruz Balae</b>  |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR<br><b>3225 Hillwood Rd, Duncan V9L6P6</b> | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR<br><b>3225 Hillwood Rd, Duncan V9L6P6</b> |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR<br><b>V9L6P6</b>                | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR<br><b>V9L6P6</b>                |
| NOMINATOR'S SIGNATURE<br>                               | NOMINATOR'S SIGNATURE<br>                              |

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<br> | DATE: (YYYY/MM/DD)<br><b>2022/10/06</b> |
|--|---|

**CANDIDATE NOMINATION PACKAGE**

|   |   |
|---|---|
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR |
| NOMINATOR'S SIGNATURE   | NOMINATOR'S SIGNATURE   |

|   |   |
|---|---|
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR |
| NOMINATOR'S SIGNATURE   | NOMINATOR'S SIGNATURE   |

|   |   |
|---|---|
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR |
| NOMINATOR'S SIGNATURE   | NOMINATOR'S SIGNATURE   |

|   |   |
|---|---|
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR |
| NOMINATOR'S SIGNATURE   | NOMINATOR'S SIGNATURE   |

|   |   |
|---|---|
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)   |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR           |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR |
| NOMINATOR'S SIGNATURE   | NOMINATOR'S SIGNATURE   |

**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

*CASHO*

DECLARED BEFORE ME: CHIEF ELECTION OFFICER OR COMMISSIONER FOR TAKING AFFIDAVITS FOR BRITISH COLUMBIA

Michelle Martineau.

AT: (LOCATION)

Duncan.

DATE: (YYYY/MM/DD)

2022/09/06

I am acting as my own Financial Agent

NOMINEE'S SIGNATURE

I have appointed as my Financial Agent

FINANCIAL AGENT'S NAME (IF APPLICABLE)

Kristiane Baskerville

CANDIDATE NOMINATION PACKAGE

**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)  | JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)             | ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA) |
| COUNCILLOR   | NORTH COWICHAN   |  |
| NOMINEE'S LAST NAME  | FIRST NAME   | MIDDLE NAME(S)   |
| SHAW   | CHRISTOPHER  | ARIEL  |
| USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT |  |  |
| MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) AS PROVIDED IN THE NOMINATION DOCUMENTS                               | CITY/TOWN  | POSTAL CODE  |
| POB 186, 3559 GARLAND AVE  | COBBLE HILL  | VORIL0   |
| ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)  | CITY/TOWN  | POSTAL CODE  |
| cashawlab@gmail.com  |  |  |
| TELEPHONE NUMBER   | EMAIL ADDRESS (IF AVAILABLE)   |  |
| 604-710-8291   | chrise.northcowichan2022.ca  |  |
| Additional Addresses for Service Information   |  | <b>OPTIONAL</b>  |
| 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)

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

CANDIDATE NOMINATION PACKAGE

C4 – Appointment of Candidate Financial Agent

PLEASE PRINT IN BLOCK LETTERS

|  |   |  |
|--|---|--|
| CANDIDATE'S LAST NAME<br><i>Shaw</i>   | FIRST NAME<br><i>Chris</i>  | MIDDLE NAME(S)   |
| POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR)<br><i>Councillor</i> | JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)<br><i>North Cowichan</i> | ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA) |
| <b>I hereby appoint as my Financial Agent for the:</b>                           |   |  |
| GENERAL VOTING DATE: (YYYY/MM/DD)<br><i>2022, 10, 15</i>                         | <input checked="" type="checkbox"/> General Local Election                        | <input type="checkbox"/> By-election                                     |
| FINANCIAL AGENT'S LAST NAME<br><i>Baskerville</i>                                | FIRST NAME<br><i>Kristiane</i>  | MIDDLE NAME(S)<br><i>Marie</i>   |
| MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)<br><i>1811 Stamps Rd</i>          | CITY/TOWN<br><i>Duncan.</i>   | POSTAL CODE<br><i>V9L 5W2</i>  |
| TELEPHONE NUMBER<br><i>250-415-1495</i>  | EMAIL ADDRESS (IF AVAILABLE)<br><i>lovewhereyoulive@telus.net</i>                 |  |
| EFFECTIVE DATE OF APPOINTMENT: (YYYY/MM/DD)<br><i>2022 08 24</i>                 |   |  |
| CANDIDATE'S SIGNATURE<br><i>Chris Shaw</i>                                       | DATE: (YYYY/MM/DD)<br><i>2022/09/06</i>   |  |

|  |   |                                      |
|--|---|--------------------------------------|
| <b>I hereby consent to act as the Financial Agent for the above-named Candidate for the:</b>                         |   |                                      |
| GENERAL VOTING DATE: (YYYY/MM/DD)<br><i>2022-10-15</i>   | <input checked="" type="checkbox"/> General Local Election  | <input type="checkbox"/> By-election |
| FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)<br><i>lovewhereyoulive@telus.net</i>           | CITY/TOWN<br><i>Duncan</i>  | POSTAL CODE<br><i>V9L 5W2</i>        |
| <b>Additional Addresses for Service Information</b> <span style="float: right;"><b>OPTIONAL</b></span>               |   |                                      |
| MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) IF EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE<br><i>1811 Stamps Rd</i> | CITY/TOWN<br><i>Duncan.</i>   | POSTAL CODE<br><i>V9L 5W2</i>        |
| FAX NUMBER   | EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED AS ADDRESS FOR SERVICE<br><i>lovewhereyoulive@telus.net</i> |                                      |
| FINANCIAL AGENT'S SIGNATURE<br><i>K. Baskerville</i>   | DATE: (YYYY/MM/DD)<br><i>2022-08-24</i>   |                                      |

CANDIDATE NOMINATION PACKAGE

C5 – Appointment of Candidate Official Agent

PLEASE PRINT IN BLOCK LETTERS

|  |   |  |
|--|---|--|
| CANDIDATE'S LAST NAME<br><b>SHAW</b>   | FIRST NAME<br><b>CHRISTOPHER</b>  | MIDDLE NAME(S)<br><b>ARIEL</b>   |
| POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR)<br><b>COUNCILLOR</b> | JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)<br><b>NORTH COWICHAN</b> | ELECTION AREA (NAME OF MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) |

I hereby appoint as my Official Agent for the:

|  |  |                                      |
|--|--|--------------------------------------|
| GENERAL VOTING DATE: (YYYY/MM/DD)<br><b>2024/00/15</b> | <input checked="" type="checkbox"/> General Local Election | <input type="checkbox"/> By-election |
| OFFICIAL AGENT'S LAST NAME<br><b>QUENVILLE</b>         | FIRST NAME<br><b>CHRISTINA<br/>TWILA</b>                   | MIDDLE NAME(S)<br><b>TWILA</b>       |
| 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<br><b>CASL</b> | DATE: (YYYY/MM/DD)<br><b>2024/09/06</b> |
|--------------------------------------|---|

CANDIDATE NOMINATION PACKAGE

**C6 – Appointment of Candidate Scrutineer**

PLEASE PRINT IN BLOCK LETTERS

|  |   |  |
|--|---|--|
| CANDIDATE'S LAST NAME<br><i>Shaw</i>   | FIRST NAME<br><i>Christopher</i>  | MIDDLE NAME(S)<br><i>Ariel</i>   |
| POSITION (E.G., MAYOR, COUNCILLOR, ELECTORAL AREA DIRECTOR)<br><i>Councillor</i> | JURISDICTION (NAME OF MUNICIPALITY OR REGIONAL DISTRICT)<br><i>North Cowichan</i> | ELECTION AREA (NAME OF MUNICIPALITY OR REGIONAL DISTRICT ELECTORAL AREA) |
| I hereby appoint as my Scrutineer for the:                                       |   |  |
| GENERAL VOTING DATE: (YYYY/MM/DD)<br><i>2022/10/15</i>                           | <input checked="" type="checkbox"/> General Local Election                        | <input type="checkbox"/> By-election                                     |
| SCRUTINEER'S LAST NAME<br><i>Woolham</i>   | FIRST NAME<br><i>William</i>  | MIDDLE NAME(S)<br><i>Donn</i>  |
| MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)<br><i>3225 Hillwood Rd.</i>       | CITY/TOWN<br><i>Duncan</i>  | POSTAL CODE<br><i>V9L 6P6</i>  |
| CANDIDATE'S SIGNATURE<br><i>Bill Woolham</i>                                     | DATE: (YYYY/MM/DD)<br><i>2022/08/28</i>   |  |





# Statement of Disclosure

## Financial Disclosure Act

### You must complete a Statement of Disclosure form if you are:

- a nominee for election to provincial or local government office\*, as a school trustee or as a director of a francophone education authority
- an elected local government official
- an elected school trustee, or a director of a francophone education authority
- an employee designated by a local government, a francophone education authority or the board of a school district
- a public employee designated by the Lieutenant Governor in Council

\*("local government" includes municipalities, regional districts and the Islands Trust)

### Who has access to the information on this form?

The *Financial Disclosure Act* requires you to disclose assets, liabilities and sources of income. Under section 6 (1) of *the Act*, statements of disclosure filed by nominees or municipal officials are available for public inspection during normal business hours. Statements filed by designated employees are not routinely available for public inspection. If you have questions about this form, please contact your solicitor or your political party's legal counsel.

### What is a trustee? – s. 5 (2)

In the following questions the term "trustee" does not mean school trustee or Islands Trust trustee. Under the *Financial Disclosure Act* a trustee:

- holds a share in a corporation or an interest in land for your benefit, or is liable under the *Income Tax Act* (Canada) to pay income tax on income received on the share or land interest
- has an agreement entitling him or her to acquire an interest in land for your benefit

|  |  |  |
|--|--|--|
| Person making disclosure:                | SHAW<br><small>last name</small>   | CHRISTOPHER ARIEL<br><small>first &amp; middle name(s)</small> |
| Street, rural route, post office box:    | 1765 COWICHAN BAY ROAD   |  |
| City:                                    | Cowichan Bay   | Province: BC   |
|  |  | Postal Code: V0R1N0  |
| Level of government that applies to you: | <input type="radio"/> provincial <input checked="" type="radio"/> local government<br><input type="radio"/> school board/francophone education authority |  |

*If sections do not provide enough space, attach a separate sheet to continue.*

### Assets – s. 3 (a)

List the name of each corporation in which you hold one or more shares, including shares held by a trustee on your behalf:

|                             |
|-----------------------------|
| ALPHA COGNITION             |
| NEURODYN LIFE SCIENCES      |
| ALI BABA GRP HLDG LTD S/ADR |
| AUSTRALIS CAPITAL INC       |
| AURINIA PHARMACEUTICALS INC |
| BROADCOM INC                |
|                             |
|                             |

**Liabilities – s. 3 (e)**

NIL

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> |
|---------------------------|-------------------------------|
|                           |                               |
|                           |                               |
|                           |                               |
|                           |                               |
|                           |                               |
|                           |                               |
|                           |                               |
|                           |                               |

**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> |
|----------------------|--|
|                      |  |
|                      |  |
|                      |  |
|                      |  |
|                      |  |
|                      |  |
|                      |  |

**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> |
|-----------------------------|--------------------|
| FREE HOLD                   | 1706 DEEP COVE RD  |
|                             | DISTRICT OF NORTH  |
|                             | VANCOUVER          |
|                             |                    |
|                             |                    |

## 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

2022/09/06  
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

# DISTRICT OF NORTH COWICHAN

## CANDIDATE INFORMATION RELEASE AUTHORIZATION

Your nomination documents are available to the public to view as soon as they are submitted. Consent provided with this form allows your municipality to provide additional information, as appearing below, to the public and / or media. **All fields are optional.**

The information you choose to share will be posted on websites operated by CivicInfo BC. This is the primary source through which the media (television, newspapers, radio, and online sources), the public, provincial ministries, researchers, and others are able to obtain province-wide local election information.

I, CHRISTOPHER ARIEL SHAW  
(please print name of person nominated)

having submitted nomination documents for election to the office of COUNCILLOR, hereby give my consent to share the following information. This information may be shared by email, posting on a website, phone, or by any other means of electronic communication.

|                                      |                         |
|--------------------------------------|-------------------------|
| <b>Address:</b>                      |                         |
| 1765 COWICHAN BAY ROAD, COWICHAN BAY |                         |
| <b>Primary Phone:</b>                | <b>Alternate Phone:</b> |
| 604-710-8292                         |                         |
| <b>Email:</b>                        |                         |
| CHRIS@NORTHCOWICHAN.CA               |                         |
| <b>Website:</b>                      | <b>Instagram:</b>       |
| NORTH COWICHAN 2022.CA               |                         |
| <b>Twitter:</b>                      | <b>Facebook:</b>        |
|                                      |                         |

### Gender (Self-identified):

Female  Male  Non-binary  Other / Undisclosed

### Previous Elected Experience (Check one):

- Incumbent. Served on Council *in the same role* between 2018 and 2022.
- Served on Council *different role* between 2018 and 2022.
- Served on Council before 2018, but not during the past term.
- No Council experience, but has been elected to office elsewhere (school, local, provincial, or federal).
- None.

CA Shaw  
(Signature of Candidate)

## DISTRICT OF NORTH COWICHAN

**CANDIDATE ACKNOWLEDGEMENT OF RECEIPT OF LIST OF ELECTORS**

The list of electors contains personal information as defined in the *Freedom of Information and Protection of Privacy Act* and this information is confidential. The *Local Government Act* provides for significant penalties for the misuse of the list of elector information. Candidates (or a person accepting the list of electors on behalf of a candidate) are responsible for protecting the confidentiality of the list of electors and for ensuring that all people in their organization, on a paid or unpaid basis, (the "Campaign Workers") who have access to the list of electors, do likewise.

The list of electors must be stored in a secure manner, so that only authorized Campaign Workers have access to the information. All persons who have access to the list of electors' information are individually responsible for protecting the confidentiality of that information.

I, the undersigned, acknowledge that:

- I have received a copy of the list of electors;
- The information contained in the list of electors is confidential, is subject to the restrictions of the *Local Government Act*, and is supplied exclusively and solely for election purposes;
- I have an overall responsibility to maintain the security and the confidential nature of the contents of this list;
- I have received access to the list of electors by electronic means and am still responsible for any paper or electronic copies of list of electors that I have generated as a result of that access;
- I understand and accept that the information may **not be used, copied, or distributed**, in whole or in part, by or for any person, in any form whatsoever, except for election purposes;
- I ensure that Campaign Workers will be made aware of the permitted uses for the list of electors and of the confidential nature of this list;
- I will notify the Chief Election Officer as soon as possible after becoming aware if any Campaign Worker has used the list of electors other than for the permitted uses;
- If I provide any Campaign Worker with access to, or a copy of personal information, I will track and retain the following information in a personal information register:

- Date of provision, access or distribution;
  - The number of duplicates of the list of electors;
  - To whom the personal information was provided;
  - How the personal information was provided (e.g., access to database, provision of electronic copy of records, provision of a paper copy of record, etc.)
  - Confirmation that the individual or entity agrees to be bound by the same; and
  - Confirmation of date that the personal information was returned to me;
- In the case of loss or theft or, or unauthorized access, to personal information, I will carry out the following procedures:
  - Contain the breach and identify the source of the breach;
  - Report the loss, theft, or unauthorized access to the Chief Election Officer;
  - Carry out any additional instructions provided by the Chief Election Officer;
  - Retrieve, if possible, all the personal information that was lost,
  - Document the circumstances that led to the incident; and
  - Review processes and procedures to prevent future incidents
- I will ensure that any Campaign Worker with access to, or a copy of personal information has returned the personal information to me after general voting day.
- I will return **all** copies, paper or electronic, of the list of electors to the Chief Election Officer no later than Friday, October 21, 2022.

Candidate Name: CAS ~~CHRISTOPHER SHAW~~

Official Agent Name (if applicable): CHRISTINA QUENUILLE

Candidate/Agent Signature CAS

Declared before me at Duncan, BC  
this 6 day of September, 2022

[Signature]  
Chief Election Officer or  
Deputy Chief Election Officer

Form of List provided: Paper Electronic

Date provided: 5/6/22

CEO/DCEO Initials [Signature]

Items Returned Paper Electronic

Date returned: \_\_\_\_\_

CEO/DCEO Initials \_\_\_\_\_