

CANDIDATE NOMINATION PACKAGE

C2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

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|--|--|---|------------------------|
| JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) CITY OF KAMLOOPS | | ELECTION AREA (E.G. MUNICIPALITY, REGIONAL DISTRICT ELECTORAL AREA) MUNICIPALITY | |
| We, the following electors of the above named Jurisdiction, hereby nominate: | | | |
| NOMINEE'S LAST NAME Karpuk | | FIRST NAME Stephen | MIDDLE NAME(S) John |
| USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT | | | |
| RESIDENTIAL ADDRESS (STREET ADDRESS) 1670 Greenfield Ave. | | CITY/TOWN Kamloops | POSTAL CODE V2B 4N6 |
| MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER) | | CITY/TOWN | POSTAL CODE |
| As a Candidate for the office of: | | | |
| POSITION (E.G. MAYOR, COUNCILLOR, DIRECTOR) Councillor | | JURISDICTION (E.G. MUNICIPALITY, REGIONAL DISTRICT) CITY OF KAMLOOPS | |

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 being nominated for, being elected to or holding the office, or is not otherwise disqualified by law.

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| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Kathleen Marie Karpuk</i> | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Hank Karpuk</i> |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>1670 Greenfield Ave Kamloops</i> | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>2332 Marsh Rd.</i> |
| 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 <i>Kathleen Karpuk</i> | NOMINATOR'S SIGNATURE <i>H. Karpuk</i> |

The City of Kamloops requires ten (10) nominators. Please see next page for additional space.

CANDIDATE NOMINATION PACKAGE

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| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Mary Elizabeth Karpuk</i> | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>NARINDER KUMAR SLOLIA</i> |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>2532 Marsh Rd</i> | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>405 GARIBOLDI DR. KANAWOODS (30)</i> |
| 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 <i>Mary E. Karpuk</i> | NOMINATOR'S SIGNATURE <i>[Signature]</i> |

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| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Aaron Joseph Krausert</i> | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>MICHAEL EARL BOWDEN</i> |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>1584 Mt Duffain Crs</i> | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>1053 Belmont Crs. Kanawoods</i> |
| 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 <i>[Signature]</i> | NOMINATOR'S SIGNATURE <i>[Signature]</i> |

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| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Sherry Chamberlain</i> | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>CHRISTOPHER JOHN DE HAN</i> |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>150 GIFFORD CRT</i> | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>791 COLUMBIA ST KANAWOODS V2C2N4</i> |
| 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 <i>[Signature]</i> | NOMINATOR'S SIGNATURE <i>[Signature]</i> |

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| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>Christopher Charles Wilson</i> | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) <i>BETTY ANN MacGOWAN</i> |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>320-1780 Springview A. V2B 1J4</i> | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR <i>6604 CHUKAR DRIVE V2C4T7</i> |
| 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 <i>[Signature]</i> | NOMINATOR'S SIGNATURE <i>[Signature]</i> |

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| I consent to the above nomination for office: | |
| NOMINEE'S SIGNATURE <i>[Signature]</i> | DATE: (YYYY / MM / DD) <i>2018/09/13</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: | Karpuk <small>last name</small> | Stephen John <small>first & middle name(s)</small> |
| Street, rural route, post office box: | 1670 Greenfield Ave. | |
| City: | Kamloops | Province: BC |
| Postal Code: | V2B 4N6 | |
| Level of government that applies to you: | <input type="radio"/> provincial <input checked="" type="radio"/> local government <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:

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|--|
| Dr. Stephen J. Karpuk Chiropractic Corp. |
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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> |
|---------------------------|--|
| Bank of Montreal | 101F-1180 Columbia St. West, Kamloops BC V2C 6R6 |
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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> |
|----------------------|--|
| Chiropractor | Aberdeen Chiropractic Clinic |
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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> |
|--|--------------------------------------|
| Strata Lot 4, Section 36, TWP 13, Rge 18, W6M KDYD | #4 1390 Hillside Drive, Kamloops, BC |
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Corporate Assets – s. 5

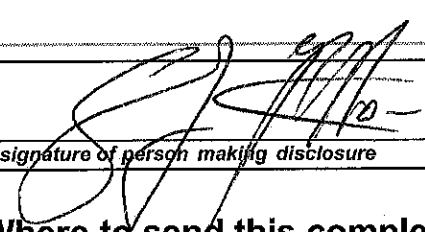
Do you individually, or together with your spouse, child, brother, sister, mother or father, own shares in a corporation which total more than 30% of votes for electing directors? (Include shares held by a trustee on your behalf, but not shares you hold by way of security.)

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.

Dr. Stephen J. Karpuk Chiropractic Corp.
Health Care
Creditors: Bank of Montreal, Hank and Betty Karpuk


signature of person making disclosure


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