

CS2 – Nomination Documents



PLEASE PRINT IN BLOCK LETTERS

JURISDICTION (NAME OF SCHOOL DISTRICT) Delta School District #37		TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE) TEA 1 (At Large)	
We, the following electors of the above-named trustee electoral area, hereby nominate:			
NOMINEE'S LAST NAME Gooch		FIRST NAME Cassandra	MIDDLE NAME(S) Masako
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT Masako Gooch			
RESIDENTIAL ADDRESS (STREET ADDRESS) [REDACTED]	CITY/TOWN Delta	POSTAL CODE [REDACTED]	
MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN	POSTAL CODE	
As a Candidate for the office of:			
POSITION BOARD OF EDUCATION TRUSTEE		JURISDICTION (NAME OF SCHOOL DISTRICT) Delta School District #37	TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE) TEA 1 (At Large)


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, age 18 or older.
2. Is a Canadian citizen.
3. Has been a resident of British Columbia, as determined in accordance with section 42 of the *School Act*, for at least six months immediately preceding today's date.
4. Is not disqualified under the *School Act* or any other enactment from being nominated for, being elected to or holding office as a trustee, 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) Tyson Miller Schofield	NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES) Taylor Burns Grant
RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR Delta, [REDACTED]	RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE) IF NOMINATING AS A RESIDENT ELECTOR Delta, [REDACTED]
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 	NOMINATOR'S SIGNATURE 

Please see over for additional space when more than two (e.g., 10) nominators are required. For Boards that require 25 nominators attach an additional sheet(s) as necessary.

I consent to the above nomination for office:	
NOMINEE'S SIGNATURE 	DATE: (YYYY/MM/DD) 2022/09/07

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I do solemnly declare as follows:

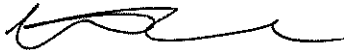
1. I am qualified under section 32 of the *School Act* to be nominated, elected and to hold the office of

POSITION

BOARD OF EDUCATION TRUSTEE

2. I am or will be on general voting day for the election, age 18 or older.
3. I am a Canadian citizen.
4. I have been a resident of British Columbia, as determined in accordance with section 42 of the *School Act*, for at least six months immediately preceding today's date.
5. I am not disqualified by the *School Act* or any other enactment from being nominated for, being elected to or holding office as a trustee, or 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 intend to fully comply with those requirements and restrictions.

NOMINEE'S SIGNATURE



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

Michelle Jansson. 

AT: (LOCATION)

Delta, BC

DATE: (YYYY/MM/DD)

2022/09/07

I am acting as my own Financial Agent

NOMINEE'S SIGNATURE

I have appointed as my Financial Agent

Knut Nordlie

FINANCIAL AGENT'S NAME (IF APPLICABLE)

CS3 – Other Information Provided by Candidate

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Office for which individual is a nominee:

POSITION BOARD OF EDUCATION TRUSTEE	JURISDICTION (NAME OF SCHOOL DISTRICT) Delta School District #37	TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE) TEA 1 (At Large)
NOMINEE'S LAST NAME Gooch	FIRST NAME Cassandra	MIDDLE NAME(S) Masako
USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT Masako Gooch		
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) AS PROVIDED IN THE NOMINATION DOCUMENTS [REDACTED]	CITY/TOWN Delta	POSTAL CODE [REDACTED]
ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)	CITY/TOWN	POSTAL CODE
TELEPHONE NUMBER [REDACTED]	EMAIL ADDRESS (IF AVAILABLE) [REDACTED]	

Additional Addresses for Service Information

OPTIONAL

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)

Achieving for Delta


I am acting as my own Financial Agent

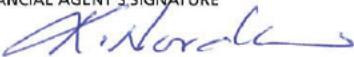
I am not acting as my own Financial Agent

Please ensure that name and mailing address information is the same as that entered on FORM CS2 – NOMINATION DOCUMENTS

CS4 – Appointment of Candidate Financial Agent


PLEASE PRINT IN BLOCK LETTERS

CANDIDATE'S LAST NAME Gooch	FIRST NAME Cassandra	MIDDLE NAME(S) Masako
POSITION BOARD OF EDUCATION TRUSTEE	JURISDICTION (NAME OF SCHOOL DISTRICT) Delta School District #37	TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE) TEA 1 (At Large)
I hereby appoint as my Financial Agent for the:		
GENERAL VOTING DATE: (YYYY/MM/DD) 2022/10/15	<input checked="" type="checkbox"/> General Local Election	<input type="checkbox"/> By-election
FINANCIAL AGENT'S LAST NAME Nordlie	FIRST NAME Knut	MIDDLE NAME(S)
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) [REDACTED]	CITY/TOWN Delta	POSTAL CODE [REDACTED]
TELEPHONE NUMBER [REDACTED]	EMAIL ADDRESS (IF AVAILABLE) [REDACTED]	
EFFECTIVE DATE OF APPOINTMENT: (YYYY/MM/DD) 2020/06/01		
CANDIDATE'S SIGNATURE 	DATE: (YYYY/MM/DD) 2022/09/07	

I hereby consent to act as the Financial Agent for the above-named Candidate for the:		
GENERAL VOTING DATE: (YYYY/MM/DD) 2022/10/15	<input checked="" type="checkbox"/> General Local Election	<input type="checkbox"/> By-election
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS) [REDACTED]	CITY/TOWN Delta	POSTAL CODE [REDACTED]
Additional Addresses for Service Information		OPTIONAL
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	
FINANCIAL AGENT'S SIGNATURE 	DATE: (YYYY/MM/DD) 2022/09/06	


CS5 – Appointment of Candidate Official Agent

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CANDIDATE'S LAST NAME Gooch	FIRST NAME Cassandra	MIDDLE NAME(S) Masako
POSITION BOARD OF EDUCATION TRUSTEE	JURISDICTION (NAME OF SCHOOL DISTRICT) Delta School District #37	TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE) TEA 1 (At Large)
I hereby appoint as my Official Agent for the:		
GENERAL VOTING DATE: (YYYY/MM/DD) 2022/10/15	<input checked="" type="checkbox"/> General Local Election	<input type="checkbox"/> By-election
OFFICIAL AGENT'S LAST NAME Schofield	FIRST NAME Tyson	MIDDLE NAME(S)
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) [REDACTED]	CITY/TOWN Delta	POSTAL CODE [REDACTED]
<input checked="" type="checkbox"/> I hereby delegate to the above-named official agent the authority to appoint scrutineers.		
CANDIDATE'S SIGNATURE 	DATE: (YYYY/MM/DD) 2022/09/07	

CS6 – Appointment of Candidate Scrutineer

PLEASE PRINT IN BLOCK LETTERS

CANDIDATE'S LAST NAME Gooch	FIRST NAME Cassandra	MIDDLE NAME(S) Masako
POSITION BOARD OF EDUCATION TRUSTEE	JURISDICTION (NAME OF SCHOOL DISTRICT) Delta School District #37	TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE) TEA 1 (At Large)
I hereby appoint as my Scrutineer for the:		
GENERAL VOTING DATE: (YYYY/MM/DD) 2022/10/15	<input checked="" type="checkbox"/> General Local Election	<input type="checkbox"/> By-election
SCRUTINEER'S LAST NAME Grant	FIRST NAME Taylor	MIDDLE NAME(S)
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) [REDACTED]	CITY/TOWN Delta	POSTAL CODE [REDACTED]
CANDIDATE'S SIGNATURE 	DATE: (YYYY/MM/DD) 2022/09/07	

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:

creditor's name(s)

creditor's address(es)

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

your capacity

name(s) of business(es)/organization(s)

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

legal description(s)

address(es)

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 Robert E.L. Gooch, Inc. (medical practice)

5683 9 Ave, Delta BC

- residential property. Location of corporate office. Owned by director of corporation

signature of person making disclosure

Sept. 7 / 2022

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

Print Form

Clear Form