

Mail-In Nomination Form

I, _____, Band # _____
(Please print name) (Band Number)

of the **Chippewas Of The Blue River First Nation** hereby nominate
(Name of First Nation)

(Name of nominee)

of the _____
(Name of First Nation)

for the position of **Chief** **Councillor** **Youth Councillor**

NOMINEE FOR CANDIDATE INFORMATION

(Address) (First Nation / Municipality) (Province / Territory) (Postal Code)

(E-mail, if applicable) () -
(Telephone Number)

NOMINATOR INFORMATION

(Address) (First Nation / Municipality) (Province / Territory) (Postal Code)

(E-mail, if applicable) () -
(Telephone Number)

(Signature) (Date)

NOTE: This signature does not constitute the witness as a seconder to this nomination.

It is important that your telephone number and address be included above in case the Electoral Officer needs to contact you for clarification regarding the name of the individual that you are nominating.