

Contact Electoral Officer with questions

5A - Notice of Nomination Meeting

Notice is hereby given that a meeting of the **Mistawasis Nehiyawak** will be held at the **Mistawasis Family Centre** on the 3rd day of **March 2017** beginning at **1:00 p.m.** and lasting at least three hours, for the purposes of nominating candidates for the positions of chief and 5 councillor positions.

IMPORTANT INFORMATION ABOUT THE NOMINATION OF CANDIDATES

1. Any elector may nominate candidates by delivering or sending by mail, email or fax to the Electoral Officer a completed, signed and witnessed nomination and a voter declaration form before the time set for the nomination meeting, OR by making a nomination orally at the nomination meeting.
2. Under the **First Nations Election Act**, an elector must not nominate more than one candidate for the position of chief and no more candidates for the position of councillor as there councillor positions available for the election.
3. The Council of the **Mistawasis Nehiyawak** has set out a candidate fee in the amount of **\$250.00** for the position of chief and **\$250.00** for the position of councillor.
4. Under the **First Nations Election Act**, a nominee does not become a candidate until they deliver to the Electoral Officer or Deputy Electoral Officer, by **6:00 p.m.** on **Monday March 6, 2017**, a signed **Candidate Declaration form**, which can be obtained from the Electoral officer. The candidate fee for the relevant position must be received by this time as well, in the form of cash, certified cheque, money order or electronic transfer payable to the Electoral Officer.

IMPORTANT INFORMATION ABOUT THE ELECTION

1. The election will be held on **Friday April 7, 2017** at the **Chief Mistawasis School** from 9:00 a.m. - 8:00 p.m.
2. Advance polls:
Wednesday, March 29, 2017 9:00 a.m. - 8:00 p.m. **Prince Albert Inn (Waskeslu Room)**
Thursday, March 30, 2017 9:00 a.m. - 8:00 p.m. **Saskatoon Ramada Hotel (Pioneer Room)**
3. Any elector may vote by mail-in ballot by completing and submitting the attached **Request for Mail-in Ballot (Form 5D)**, which forms part of this mail-out from the electoral officer and deputy electoral officer, Angie Chief-Wuttunee, along with a copy of identification by **Saturday, April 1, 2017**.
4. Any elector may permit the electoral officer to release their name to the candidates.

Given under my hand this 31st day of January, 2017


Howard McMaster
Electoral Officer

PO Box 1088
North Battleford, SK
S9A 3K2

Toll free 1-844-862-2113
Tel: 306-937-2113 (North Battleford only)
Fax: 1-306-937-3395
Email: angiechief@hotmail.com
howardmcmaster@sasktel.net

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If you want your name and address to be given to candidates at this election for the purpose of communicating with you, please check the statement below, print and sign your name, detach this form at the dotted line and return the bottom portion to the Electoral Officer.

I authorize that my name and address be given to candidates at this election.

_____	_____	_____
Print Name	Date of Birth	Signature
_____	_____	_____
Address	City/Town/First Nation	Prov. Postal Code



5B - Mail-in Voter Declaration to Nominate Candidates

In the matter of the election of the Mistawasis Nehiyawak, held according to the *First Nations Election Regulations*,

I _____ solemnly declare that:
(Please print your name)

1. I am a member of the Mistawasis Nehiyawak Band of Indians.
2. My band/treaty/registry/status number is _____ and/or
my date of birth is _____.
3. My current mailing address is: _____
(Street number and name or P.O. Box)

(City/Town/First Nation) Province/Territory Postal Code

4. I am 18 years of age.
5. I do not know of any reason why I should be disqualified from voting at this election.

I make this solemn declaration conscientiously believing it to be true and knowing that it has the same force and effect as if made under oath. I understand that it is an offence to make a false statement in this declaration.

Signature of Elector

Date

WITNESS DECLARATION (to be filled out by any person who is at least 18 years old)

Declared before me _____ at _____
(Name) (Address)

this _____ day of _____ 2017.
(date) (month)

Signature of Witness

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

Address: _____
(Street number and name or P.O. Box)

(First Nation or City/Town) Province/Territory Postal Code

Telephone Number of Witness: (____) _____ - _____

5C - Mail-In Nomination Form

I _____, Band # _____
(Print your name)

of the **Mistawasis Nehiyawak** hereby

nominate _____

of the **Mistawasis Nehiyawak**

for the position of: Chief _____ Councillor _____

NOMINEE FOR CANDIDATE INFORMATION

_____	_____	_____	_____
<i>Address</i>	<i>First Nation</i>	<i>Province</i>	<i>Postal Code</i>
_____	(____) _____		
<i>E-mail, if applicable</i>	<i>Telephone Number</i>		

NOMINATOR INFORMATION

_____	_____	_____	_____
<i>Address</i>	<i>First Nation or City/Town</i>	<i>Province</i>	<i>Postal Code</i>
_____	(____) _____		
<i>E-mail, if applicable</i>	<i>Telephone Number</i>		
_____	_____		
<i>Signature</i>	<i>Date</i>		

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.

Form 5D - Request for Mail-in Ballot

INFORMATION FOR THE ELECTOR:

The Band Council Election of the Mistawasis Nehiyawak will be held on Friday, April 7, 2017.


If you wish to vote by mail-in ballot, you must complete this form (**Form 5D**) and send it to the Deputy Electoral Officer or Electoral Officer by mail, fax or e-mail. The information appears below.

You must also include a copy of proof of identity, such as a copy of your:

1. Certificate of Indian Status,
2. Drivers License,
3. Health Card, or
4. Another document that proves your identity.

*** Do not provide the original identification ***

If the Deputy Electoral Officer or Electoral Officer receives this request **Form 5D** on or before Saturday, April 1, 2017, a mail-in ballot package will be sent to you at the address provided below on this form. If you have any questions, please contact the Deputy Electoral Officer, Angie Chief-Wuttunee or the Electoral Officer by email.


Howard McMaster
Electoral Officer

PO Box 1088
North Battleford, SK
S9A 3K2

Toll free
Tel:
Fax:
Email:

1-844-862-2113
306-937-2113 (North Battleford only)
1-306-937-3395
angiechief@hotmail.com
howardmcmaster@sasktel.net

I _____, _____ am a qualified elector of the
(name of elector) (Band number)

First Nation and do hereby request that a mail-in ballot package be sent to me at:

_____ Province _____ Postal Code
Address City, Town (Off-Reserve)

Telephone: (____) _____ - _____ E-mail: _____

For use by the Electoral Officer only

Request received on: _____ Mail-in Ballot sent on: _____

Type of identification: _____