

SAGKEENG ELECTION LAW

Form A - Appointment of Deputy Electoral Officer

Name of Deputy Electoral Officer: _____

Address of Deputy Electoral Officer: _____

Effective Dates of Appointment: _____

Supervising Deputy Electoral Officer? Yes No

If Yes, at which Polling Location? _____

Declarations

I, _____, Electoral Officer of the Sagkeeng First Nation, hereby appoint the above named individual to be a Deputy Electoral Officer for the election scheduled to take place on _____. By this appointment, I authorize the Deputy Electoral Officer to exercise all of the powers conferred on that position by the Sagkeeng Election Law.

Signature of Electoral Officer

Date

By executing this form, I, _____ (name of DEO), do hereby accept the appointment as a Deputy Electoral Officer and I swear/affirm that I will help conduct the election in a **fair and impartial manner**. I will not favour any candidate, either publicly or privately. I will, at all times, act in the best interests of the Sagkeeng First Nation, abide by and respect the Sagkeeng Election Law, and will follow the directions of the Chief Electoral Officer.

Deputy Electoral Officer

Date

SAGKEENG ELECTION LAW

Form B – Nomination Form

We nominate _____ Treaty #: _____

For the position of Chief Councillor

Nominator

My name is _____ Treaty # _____

Telephone Number _____ Email Address: _____

The best way to contact me is: Phone Email Other (_____)

Address: _____

By signing below, I agree that I am an Elector of the Sagkeeng First Nation as set out in the Sagkeeng Election Law, and that I have not nominated any other candidate for the position nominated on this form.

Signature of Nominator: _____

Signature and Printed Name of Witness: _____

Secunder

My name is _____ Treaty # _____

Telephone Number _____ Email Address: _____

The best way to contact me is: Phone Email Other (_____)

Address: _____

By signing below, I agree that I am an Elector of the Sagkeeng First Nation as set out in the Sagkeeng Election Law, and that I have not seconded any other candidate for the position nominated on this form.

Signature of Secunder: _____

Signature and Printed Name of Witness: _____

Candidate

I accept the nomination above: Yes No

I want my name to appear on the ballot as:

Surname	Given Name(s)	Nicknames (optional)
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Phone Number	Email Address	Treaty #
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Address

Criminal Record Check Attached? Yes No

Child Abuse Registry Check Attached? Yes No

By signing below, I agree that I am the nominated candidate, that I have not previously served two terms on the Executive Council as set out in the Sagkeeng Election Law and that I am eligible to be a candidate as required by section 8 of the Sagkeeng Election Law. I agree that during the election and afterwards if I am elected, I will conduct myself honestly and will honour, respect and abide by the Sagkeeng Election Law and all other laws of the Sagkeeng First Nation.

Signature of Candidate

Signature of Witness

SAGKEENG ELECTION LAW
Form D – Information Request Form

Name: _____

Email: _____

Address: _____

By signing below, I, _____ hereby authorize the Electoral Officer to provide my name and contact information specified above to the registered Candidates in the Sagkeeng First Nation Election scheduled to take place on _____. I will not hold the Electoral Officer or the Sagkeeng First Nation liable if, after providing the information to the candidates, it is used in any way other than was intended.

Signature of Elector

Date

SAGKEENG ELECTION LAW
Form E – Withdrawal of Candidate

Candidate Name

Treaty #

I _____, a candidate for Chief/Councillor of the Sagkeeng First Nation, hereby withdraw my candidacy and declare that I will no longer be a candidate in the election scheduled to be held on _____.

Signature of Candidate

Date

Signature of Electoral Officer

Date

SAGKEENG ELECTION LAW

Form F – Mail Ballot Request

*In order to receive a mail ballot, this **entire** form must be filled out. The Electoral Officer may reject any request for a mail ballot which is not properly submitted.*

I am a member of Sagkeeng, and a qualified Elector according to the Sagkeeng Election Law, and I request a Mail Ballot for the current Sagkeeng Election:

Surname

Given Name(s)

Phone Number

Email Address

Treaty #

Mailing Address

Please check the box which applies:

- My permanent or long-term residence is outside Treaty 1 Territory:
- I temporarily live outside Treaty 1 Territory for employment, medical or education purposes?
- I live within Treaty 1 Territory, but am unable to attend a voting location without suffering undue hardship (which includes infirmity, potential loss of employment, unreasonable expense, or school exams or assessments):

In order to receive a mail ballot, you must send this form to the Electoral Officer along with the following other documents:

- Copy of **both sides** of your Status Card
- Copy of any document showing both your name and address (e.g. Drivers' license, Hydro bill)

By signing below, I agree that: (a) The information above is accurate and truthful; (b) I have not received or been offered any money or other compensation from any person in exchange for my request for a mail ballot; (c) I filled this form out by myself, and I have not received any assistance in filling out this form; and (d) If I receive a mail ballot, I will complete the ballot on my own, with no assistance, and I will not accept any benefit in exchange for marking or not marking my ballot for a particular person or persons.

Signature of Voter

Signature of Witness

SAGKEENG ELECTION LAW

Form F-1 – Voter Declaration

Voter Name

Treaty #

I _____, am an Elector of Sagkeeng First Nation according to the rules set out in section 5 of the Sagkeeng Election Law.

I am entitled to vote by mail ballot according to the rules set out in section 86 of the Sagkeeng Election Law.

I have received no benefit or offer of any benefit in exchange for deciding who to vote for or not vote for.

I have filled out my ballot by myself, with no assistance by any other person.

I will do everything necessary to protect the secrecy of my ballot and the integrity of the voting system.

I understand that it is a Corrupt Practice for a person to offer any reward, benefit or incentive, or threaten any consequence, in exchange for a person requesting a Mail Ballot, or in exchange for a person voting for or against any Candidate or Candidates.

Signature of Voter

Date

Signature of Witness

Date

SAGKEENG ELECTION LAW

Form G – Election Day Addition to Voters List

Surname

Given Name(s)

Date of Birth

Phone Number

Email Address

Treaty #

Address

I am a member of Sagkeeng: Yes No

I am 18 years of age or older Yes No

By signing below, I agree that I meet the qualifications to be an Elector set out in section 5 of the Sagkeeng Election Law, and that I have not already voted, and will not subsequently vote in the current election.

Signature of Member

I _____ am a Deputy Electoral Officer appointed under the Sagkeeng Election Law. I have reviewed the identification of the above named individual, and am satisfied that he is eligible to be an elector under section 5 of the Sagkeeng Election Law.

Type of Identification provided: _____

ID number (e.g. Treaty Number, Drivers License Number, etc): _____

Signature of Deputy Electoral Officer

SAGKEENG ELECTION LAW

Form H – Election Day Vouching Declaration

MEMBER REQUESTING A BALLOT

Surname

Given Name(s)

Date of Birth

Phone Number

Email Address

Treaty #

Address

I am a member of Sagkeeng: Yes No

I am 18 years of age or older Yes No

By signing below, I agree that I meet the qualifications to be an Elector set out in section 5 of the Sagkeeng Election Law, and that I have not already voted, and will not subsequently vote in the current election.

Signature of Member Requesting a Ballot

MEMBER VOUCHING

I _____ am a member of Sagkeeng and an Elector whose name appears on the Electors' List.

By signing below, I agree that I know the Member Requesting a Ballot personally, and I know them to be a member of Sagkeeng who is 18 years of age or older.

I understand that vouching falsely on this form is a corrupt practice.

Signature of Member Vouching

I _____ am a Deputy Electoral Officer appointed under the Sagkeeng Election Law. I have reviewed the identification of the Member Vouching, and am satisfied that they are an elector whose name appears on the Electors' List.

Signature of Deputy Electoral Officer

SAGKEENG ELECTION LAW

Form I – Declaration for Assisting an Elector

Voter Name

Treaty #

I require assistance in order to cast my ballot, and would like _____ to assist me.

Signature of Voter

Date

I, _____ have been asked by the Elector named above to assist them in casting their ballot.

I agree that I will mark the ballot, or assist the Elector in marking the ballot, exactly how I am instructed to do so. I will not influence or attempt to influence the Elector's vote, and I will not mark the ballot in a way other than as requested by the Elector. I understand that doing otherwise is a corrupt practice.

Signature of Assistant

Date

SAGKEENG ELECTION LAW

Form J – Candidate Representative Form

CANDIDATE REPRESENTATIVE

Surname

Given Name(s)

Date of Birth

Phone Number

Email Address

Treaty #

Address

I am a member of Sagkeeng: Yes No

I am 18 years of age or older Yes No

By signing below, I agree that I am an Elector under the Sagkeeng Election Law, and that I consent to serve as a Candidate Representative for _____. As a Candidate Representative, I agree that I will not interfere or attempt to interfere with the voting process, and will protect the secrecy of the vote..

Signature of Candidate Representative

CANDIDATE'S CONFIRMATION

I _____ am a candidate in the Sagkeeng Election.

I appoint the above named individual to be one of my Representatives pursuant to sections 133-141 of the Sagkeeng Election Law.

Signature of Candidate

Date

SAGKEENG ELECTION LAW
Form K – List of Ballot Objections

<u>Objection #</u> _____ :	
Objection made by:	
Candidate Representative	Representative for:
Brief description of Objection:	

Signature of Voter	Date

<u>Objection #</u> _____ :	
Objection made by:	
Candidate Representative	Representative for:
Brief description of Objection:	

Signature of Voter	Date

SAGKEENG ELECTION LAW

Form L – Statement of Votes

Voting Location: _____

Candidate Name	Number of Votes	Candidate Name	Number of Votes

Rejected Ballots: _____

Disallowed Ballots: _____

I certify that I supervised the counting of ballots and the number of votes recorded in the chart above is accurate:

Signature of Supervising DEO

Printed Name of Supervising DEO

Date