## **Mail In Nomination Form**

l,	, band # <u>136</u>
(Please print name)	
of the Wasauksing First Nation hereby n	nominate
Nomination for Chief	
1101	
Name:	Tel #:
Address:	
Nomination(s) for Councillor	
Name:	Tel #:
Name:	
Addiess	
Name:	Tel #:
Address:	
Name:	
Address:	
Name:	Tel #:
Address:	
7 da 1655.	
Name:	Tel #:
Signature of Elector	 Date
Telephone # ( )	

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