

**NOMINATION PAPER FOR
DELEGATE, VICE-DELEGATE OR DISTRICT NOMINATOR
2014 ELECTION
(Please print legibly or type)**

I, of
am a member in good standing of the Doctors of BC in the same district as the nominated member and
hereby nominate
for election as **DELEGATE** _____; **VICE-DELEGATE** _____; **DISTRICT NOMINATOR**
_____; (Please check **one** of the foregoing) for District
Dated at BC this day of 2014

.....
Signature of Mover

I, of
am a member in good standing of the Doctors of BC in the same district and hereby second the above
nomination.
Dated at BC this day of 2014

.....
Signature of Seconder

I, of
am a member in good standing of the Doctors of BC in the same district and hereby accept the above
nomination.
Dated at BC this day of 2014

.....
Signature of Member Nominated

**PLEASE PRINT AND COMPLETE THIS NOMINATION PAPER. ALL THREE SECTIONS OF THE
NOMINATION PAPER MUST BE COMPLETED AND FILED WITH THE CHIEF EXECUTIVE OFFICER
BEFORE 11:59 pm, Thursday March 20, 2014**

PLEASE COMPLETE THE CANDIDATE INFORMATION ON REVERSE

The nomination paper can be scanned and returned by fax to (604) 638-2919, emailed to ceo@doctorsofbc.ca or mailed to the CEO, Doctors of BC, 115-1665 West Broadway, Vancouver BC V6J 5A4.

CANDIDATE INFORMATION

The purpose of collecting the following information is to create a biography for circulation to the members of your district in the event of an election.

NAME _____

MAILING ADDRESS _____

OFFICE PHONE NUMBER _____

CELL PHONE NUMBER _____

EMAIL ADDRESS _____

UNIVERSITY _____ YEAR _____

DATE PRACTICE COMMENCED IN YOUR PRESENT DISTRICT _____

SPECIALTY, IF ANY _____

Detail relevant experience with related committees and/or other offices held, past or present, in other Societies, etc

I consent to the use of this information for the purpose identified above.....
Signature of Member Nominated