

WK-W-RG





RANGITĀIKI GENERAL WARD NOMINATION PAPER



To: Electoral Officer, Whakatāne District Council PO Box 5135, Victoria Street West, Auckland 1142

A. For the CANDIDATE to complete	
1, First names WILSON BRADBURN Surname JAMES	
Residential address 75 MeLEAN ROAD RD3 WHAKATANE	
am eligible for election, and consent to this nomination. Under section 25 of the Local Electoral Act 2001, a candidate must be a parliamentary elector AND a New Zealand citizen. Proof of NZ citizenship is required. Section 61(2) requires a candidate to state whether their principal place of residence is in or out of the area they are standing in. Please tick in the boxes beside the statements below which apply to you and complete any other details that are applicable. I confirm that:	
I am a parliamentary elector at the residential address given above	4
my principal place of residence is IN the Rangitāiki General Ward area OR my principal place of residence is NOT IN the Rangitāiki General Ward area	
I wish my name to be shown on the voting document as (commonly known name if different to full name shown above)	
I wish my affiliation to be shown on the voting document as (endorsement by a party/organisation/group - can be 'Independent' or left blank) You will need to provide a letter of consent to use an affiliation if anything other than 'Independent' or blank	
I am also a candidate seeking election to the following position(s)	
I submit with this nomination:	
\$200 deposit/ proof of NZ citizenship proof of deposit	
Signature of candidate Date (dd/mm/yyyy) 21/67/2025	
B. For the TWO NOMINATORS to complete (Nominators must be electors on the electoral roll for the Rangitāiki General Ward) We, the undersigned electors of Rangitāiki General Ward, nominate (enter candidate details):	
Full name WAL BRIDGEN JAMES.	
with their consent, as a candidate for Councillor of the Rangitāiki General Ward for the election to be held on Saturday 11 October 2025.	
Dated at (location eg Whakatane) Whakatane Date (dd/mm/yyyy) 21/07/2025	
NOMINATOR 1 NOMINATOR 2	
Full name SILL VIENETTE MCLEOD Full name Donald Jan McLeod.	
Residential address TERAITURD RD3 WHAKATASE Residential address 220 TeRah v Rd RD3 Signature of nominator 1, 9 M J. d.	
Signature of nominator D. Y. M. Lead Signature of nominator D. Y. M. Lead	
NOTE: All nomination material must be provided together, and must be in the hands of the electoral officer or an electoral official no later than noor Friday 1 August 2025.	n on
C. For the electoral officer/electoral official to complete	
Received at (council office) Whatatane DC Office Time (eg 10.30am) 2:33 pm Date (dd/mm/yyyy) 21/7/2	25
Signature of electoral officer/electoral official GMZ //	