CS4 – Appointment of Candidate Financial Agent

PLEASE PRINT IN BLOCK LETTERS

CANDIDATE'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
POSITION BOARD OF EDUCATION TRUSTEE	JURISDICTION (NAME OF SCHOOL DISTRICT) School District No. 35 (Langley)	TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE) TEA No. 1

I hereby appoint as my **Financial Agent** for the:

GENERAL VOTING DATE: (YYYY/MM/DD) 2026/10/17	☑ General Local Election	☐ By-election
FINANCIAL AGENT'S LAST NAME	FIRST NAME	MIDDLE NAME(S)
MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER)	CITY/TOWN	POSTAL CODE
TELEPHONE NUMBER	EMAIL ADDRESS (IF AVAILABLE)	
EFFECTIVE DATE OF APPOINTMENT: (YYYY/MM/DD)		
CANDIDATE'S SIGNATURE	DATE: (YYYY/MM/DD)	

I hereby consent to act as the **Financial Agent** for the above-named Candidate for the:

GENERAL VOTING DATE: (YYYY/MM/DD) 2026-10-17	☑ General Local Election	☐ By-election
FINANCIAL AGENT ADDRESS FOR SERVICE (STREET ADDRESS OR EMAIL ADDRESS)	CITY/TOWN	POSTAL CODE

Additional Addresses for Service Information **OPTIONAL**

MAILING ADDRESS (STREET ADDRESS/PO BOX NUMBER) IF EMAIL WAS PROVIDED AS ADDRESS FOR SERVICE	CITY/TOWN	POSTAL CODE
FAX NUMBER	EMAIL ADDRESS IF MAILING ADDRESS WAS PROVIDED AS ADDRESS FOR SERVICE	
FINANCIAL AGENT'S SIGNATURE	DATE: (YYYY/MM/DD)	