



HAWKE'S BAY DISTRICT HEALTH BOARD

2016 NOMINATION PAPER

Nominations must be in the hands of the Electoral Officer/Official before 12 noon, Friday 12th August 2016

A: CANDIDATE to fill out after reading important information on reverse

I (*candidate's full name*),

hereby consent to the nomination and certify that I am qualified to be a candidate under section 25 of the Local Electoral Act 2001 and regulations, clause 17, schedule 2 of the NZ Public Health & Disability Act 2000 and section 30(2) of the Crown Entities Act 2004. In particular I am a New Zealand citizen and a parliamentary elector. (See notes on the reverse of this form).

Address (*as listed on the parliamentary roll*):

Email (*EO's preferred first point of contact*):

Mobile phone:

Home phone:

I understand that the details provided on this nomination paper will be publicly available for election purposes.

Please advise the Electoral Officer/Official at the time of lodging your nomination if there are contact details that you would not like to be published.

Note: Section 55(5) of the Local Electoral Act 2001 requires that this nomination form be available for public inspection at **Napier City Council's** office located at **231 Hastings Street, Napier**. Please note that candidate and nominator details provided on this form will also be placed on the **Hawke's Bay District Health Board** website.

I submit with this nomination (*please tick appropriate circles*):

Evidence of deposit (\$200)

Photo

Profile statement

Conflict of interest statement

I understand that, in not providing a profile or photo, the words "*Profile/Photo not supplied*" will appear below my name in the profile booklet that will be sent out with the voting paper. **All nomination documents must be submitted at the same time.**

My principal place of residence (*tick ONE circle*):

is **WITHIN** the Hawke's Bay District Health Board area

is **NOT WITHIN** the Hawke's Bay District Health Board area

I am also standing for the following elections:

I wish my name to be shown on the voting document as:

I wish to use the following affiliation (*To be left blank if the candidate does not wish to use any party/group affiliation. A candidate with no affiliation may request that 'independent' be shown*):

Signature:

Date:

B: NOMINATORS to fill out

We, the undersigned electors of the **Hawke's Bay District Health Board** hereby nominate (*candidate's full name*):

with his/her consent, as a candidate for the office of **Member** of the **Hawke's Bay District Health Board**, the election for which is to be held on Saturday 8 October 2016.

Full name of **First Nominator**:

Address:

Mobile phone:

Home phone:

Signature of **First Nominator**:

Date:

Full name of **Second Nominator**:

Address:

Mobile phone:

Home phone:

Signature of **Second Nominator**:

Date:

NOTES

- 1 Candidates for the position of Member of the Hawke's Bay District Health Board do not need to live within the Hawke's Bay District Health Board area, but must be enrolled as a parliamentary elector.
- 2 Both nominators must be enrolled as electors in the Hawke's Bay District Health Board area.
- 3 A candidate cannot nominate themselves for office.
- 4 A candidate cannot stand for more than one District Health Board.
- 5 A candidate cannot be a person listed under S30(2) of the Crown Entities Act 2004; namely:
 - (a) a person who is an undischarged bankrupt;
 - (b) a person who is prohibited from being a director or promoter of, or being concerned or taking part in the management of, an incorporated or unincorporated body under the Companies Act 1993, or the Financial Markets Conduct Act 2013, or the Takeovers Act 1993
 - (c) a person who is subject to a property order under the Protection of Personal and Property Rights Act 1988
 - (d) a person in respect of whom a personal order has been made under that Act that reflects adversely on the person's:
 - (i) competence to manage his or her own affairs in relation to his or her property; or
 - (ii) capacity to make or to communicate decisions relating to any particular aspect or aspects of his or her personal care and welfare.
 - (e) a person who has been convicted of an offence punishable by imprisonment for a term of 2 years or more, or who has been sentenced to imprisonment for any other offence, unless that person has obtained a pardon, served the sentence, or otherwise suffered the penalty imposed on the person
 - (f) a member of Parliament
 - (g) a person who is disqualified under another Act.
- 6 A candidate may under section 56 of the Local Electoral Act be nominated under a name which the candidate is commonly known provided that the name will not cause offence to a reasonable person, be unreasonably long, include or resemble an official rank or title or cause confusion or mislead electors.
- 7 Where no affiliation is claimed, or an affiliation is disallowed by the Electoral Officer under section 57 of the LEA, nothing will be shown in the public notice or the voting paper against the candidate's name. A candidate with no affiliation may request that 'Independent' be shown.
- 8 Under section 121 of the LEA, any person is liable to a fine of up to \$2,000 who:
 - (a) Knowing themselves to be ineligible for election, consents to being nominated for election; or
 - (b) Nominates any person as a candidate whom he/she knows to be ineligible for election; or
 - (c) Not being the candidate signs any nomination paper knowing that they are not qualified to vote at the election.
- 9 Nominations of candidates **must** be in the hands of the Electoral Officer/Official before 12 noon on the 12th day of August 2016.

RETURN AND PAYMENT DETAILS

Return by: post to:	To: Electoral Officer, Hawke's Bay District Health Board, PO Box 3138, Christchurch 8140, New Zealand
or, deliver to:	Napier City Council, 231 Hastings Street, Napier
or, scan and email to:	hbdhb@electionz.com

Payments can be made by **cash**, **eftpos** or **cheque** directly at the Napier City Council, 231 Hastings Street, Napier, if you are returning this form by hand or by online banking using the details provided below:

Account name:	electionz.com	Bank:	ANZ
Account number:	01 0825 0126062 00	Particulars/Reference:	HBDHB
Code:	(Your initials and surname)		

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All nomination documents must be submitted at the same time.



For assistance phone the tollfree helpline:

0800 666 048



ELECTORAL OFFICIAL to fill out

Received at the hour of:		on the		day of		20
Candidate Roll #:						
First Nominator Roll #:			Second Nominator Roll #:			
Nomination documents approved:	<input type="radio"/> Nomination paper	<input type="radio"/> Deposit/proof of deposit	<input type="radio"/> Place of residence			
	<input type="radio"/> Photo	<input type="radio"/> Profile statement	<input type="radio"/> Standing for other elections	<input type="radio"/> Conflict of Interest Statement		
Signature of Electoral Official:					Date:	