

LOCAL GOVERNMENT ELECTION, 2015

**Appendix C**

FORM T

*[Subsection 104(1) of the Act]*

**Appointment of Candidate's Agent**

This is to certify that \_\_\_\_\_

*(Name)*

of \_\_\_\_\_

*(Address)*

Is authorized to attend at Polling Area No. \_\_\_\_\_ located \_\_\_\_\_

*(Address or place)*

on the \_\_\_\_\_ day of October 2018, as my agent.

Dated at \_\_\_\_\_, this \_\_\_\_\_ day of October 2018.

\_\_\_\_\_

*(Candidate)*