

BALLOT PAPER

CENTRL 1































**Election of 11 Members to
the Local First Nations Voice
Central Region**

Issuing Officer Initials

Directions

Choose 1 or more candidates by numbering the box next to their pictures in the order of your choice.

After voting, fold the ballot paper and put it in the ballot paper envelope.

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> |  | COLEMAN, Rosalind |
| <input type="checkbox"/> |  | WATERS, Sonia |
| <input type="checkbox"/> |  | LEIDIG, Robert |
| <input type="checkbox"/> |  | O'MEARA, Marnie |
| <input type="checkbox"/> |  | RIGNEY-THYER, Chris |
| <input type="checkbox"/> |  | SAUNDERS, Cheryl Lynn |
| <input type="checkbox"/> |  | WILSON, Scott |
| <input type="checkbox"/> |  | SUMNER, Moogy |
| <input type="checkbox"/> |  | AGIUS, Yvonne |
| <input type="checkbox"/> |  | LAWRIE, April |
| <input type="checkbox"/> |  | TELFER, Jakirah |
| <input type="checkbox"/> |  | THOMAS, Khatija |
| <input type="checkbox"/> |  | WANGANEEN, Tahlia L |
| <input type="checkbox"/> |  | RIGNEY, Isaiah |
| <input type="checkbox"/> |  | MINNIECON, Tony Wayne |
| <input type="checkbox"/> |  | WARIA-READ, Patricia |
| <input type="checkbox"/> |  | CAIRNS, Cheryl |
| <input type="checkbox"/> |  | BATES, Stacey |
| <input type="checkbox"/> |  | O'DONNELL, Kim |
| <input type="checkbox"/> |  | SUMNER-GRAHAM, Phillip |
| <input type="checkbox"/> |  | LOCHOWIAK, John |
| <input type="checkbox"/> |  | AXLEBY, Cheryl |
| <input type="checkbox"/> |  | WANGANEEN, Kimberley |
| <input type="checkbox"/> |  | CARBINE, John |
| <input type="checkbox"/> |  | MILLER, Sandy |
| <input type="checkbox"/> |  | AXLEBY, Debra Rose |
| <input type="checkbox"/> |  | NELSON, Jane |
| <input type="checkbox"/> |  | HICKS, Naomi Marie |
| <input type="checkbox"/> |  | SUMNER, Raymond |
| <input type="checkbox"/> |  | SCHKABARYN, Anna |
| <input type="checkbox"/> |  | VARCOE, Evelyn |
| <input type="checkbox"/> |  | CARUSO, Jennifer |
| <input type="checkbox"/> |  | DYER (BONNEY-WILLIAMS), Sherrell |
| <input type="checkbox"/> |  | DIXON, Susan |
| <input type="checkbox"/> |  | FERNANDES, Gloria |
| <input type="checkbox"/> |  | HUNTER-HEBBERMAN, Courtney |
| <input type="checkbox"/> |  | MOYLE, Deb |
| <input type="checkbox"/> |  | O'LOUGHLIN, Kylie |
| <input type="checkbox"/> |  | CLINCH, Douglas |
| <input type="checkbox"/> | | STEWART, Harold |
| <input type="checkbox"/> | | TURNER, Michael S |