



WHAPMAGOOSTUI FIRST NATION

414, Whapmakw Maskino
P.O. Box 390
WHAPMAGOOSTUI, (QUE)
J0M 1G0



4 _____
Signature of elector/ᐱᐱ ᑲ ᑲ ᑲ ᑲ ᑲ ᑲ
Name/ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Address/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Profession/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____

5 _____
Signature of elector/ᐱᐱ ᑲ ᑲ ᑲ ᑲ ᑲ ᑲ
Name/ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Address/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Profession/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____

6 _____
Signature of elector/ᐱᐱ ᑲ ᑲ ᑲ ᑲ ᑲ ᑲ
Name/ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Address/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Profession/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____

7 _____
Signature of elector/ᐱᐱ ᑲ ᑲ ᑲ ᑲ ᑲ ᑲ
Name/ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Address/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Profession/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____

8 _____
Signature of elector/ᐱᐱ ᑲ ᑲ ᑲ ᑲ ᑲ ᑲ
Name/ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Address/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Profession/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____

9 _____
Signature of elector/ᐱᐱ ᑲ ᑲ ᑲ ᑲ ᑲ ᑲ
Name/ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Address/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____
Profession/ᐱᐱᑲ ᑲᑲ ᑲᑲ ᑲᑲ _____

<p>Date and time form was handed out: ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ</p>	<p>Date and time form was received ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ ᑲᑲ</p>
---	--