

2026 GENERAL LOCAL ELECTION

RESIDENT ELECTOR APPLICATION TO RECEIVE A MAIL BALLOT

1. Full name of elector: _____

2. Residential address within Osoyoos municipality for which a mail ballot is requested:

Phone: _____

Email: _____

3. Mailing address, including postal code (if different from residential address):

4. Do you wish to pick up the mail ballot when it is ready? _____

OR

Prefer that the mail ballot be mailed to you at the mailing address provided above _____

OR

Request that the mail ballot be mailed to you at an alternate address at:

Please provide reason that the mail ballot cannot be sent to your mailing address:

5. Signature of elector applying for a mail ballot: _____

Date: _____

Return application to:
Town of Osoyoos
Box 3010, 8707 Main Street
Osoyoos, B. C. V0H 1V0
elections@osoyoos.ca