

# Ministry of Municipal Affairs and Housing

# **Endorsement of Nomination - Form 2**

Municipal Elections Act, 1996 (Section 33)

#### Instructions

- · Candidates must obtain 25 original signatures.
- An individual providing an endorsement signature must be a Canadian citizen, aged 18 or older and have a qualifying address in the municipality. An individual may sign an endorsement for more than one person seeking nomination.
- The qualifying address provided must include the postal code.

Personal information collected on this form is obtained under the authority of sections 33 and 95 of the *Municipal Elections Act*, 1996. Under section 88 of the *Municipal Elections Act*, 1996 (and despite anything in the *Municipal Freedom of Information and Protection of Privacy Act*) documents and materials filed with or prepared by the clerk or any other election official under the *Municipal Elections Act*, 1996 are public records and, until their destruction, may be inspected by any person at the clerk's office at a time when the office is open.

Name of person seeking nomina	ation			
Last Name or Single Name		Given Name(s)	LLIAM	FRANCIS.
Endorsement signatures for the nomination	on of a person for an of	fice in the municipality c	of	
SPRINGWATE	R	in the year <u>202</u>	2	
Name of person providing endo	rsement – 1			
Last Name or Single Name	5	Given Name(s)	erek	
Qualifying Address		ge Johnst	on Rd	
Municipality  Springwater  I endorse  Williams		ge Johnst Province Marjo		Postal Code
I endorse	am Haight	as a c	andidate and decla	are that I am qualified
to be an elector in this municipality.		A A A A A A A A A A A A A A A A A A A		
1 des	3//\	202	2/06/21	
Signature	e		yyyy/mm/dd)	
Name of person providing endo	rsement – 2			
Last Name or Single Name		Given Name(s)		
		Lina		
Qualifying Address Suite/Unit Number   Street Number   S	Street Name			
2 158	~	nston Rd		
Municipality Springwater		Province ON		Postal Code
Tendorse William Ho	right	as a ca	andidate and decla	are that I am qualified
to be an elector in this municipality.				
Di Rolla	<\	2017 - 9	06-21	
Signature		Date (y	)6 2 ( /yyy/mm/dd)	<del></del>

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Name of person providing endorsement – 3		
Last Name or Single Name	Given Name(s)	
MUSSCHE	214	
Qualifying Address		
Suite/Unit Number   Street Number   Street Name		
45 HERON PLUP		
Municipality	Province	Postal Code
Municipality  Municipality  Mine Sing Springurse  I endorse  BILL HAIGHT		194021
Tendorse 12.11 HAIGH	as a candidate and declare	that I am qualified
to be an elector in this municipality.		
Signature	Date (vvv/mm/dd)	22
Signature	Date (yyyy/mm/dd)	
Name of person providing endorsement – 4		
Last Name or Single Name	Given Name(s)	
GILROY	WILLIAM	
Qualifying Address		
Suite/Unit Number   Street Number   Street Name		
2082 GEORGE TO	PHNSTON PO.	
Municipality	Province	Postal Code
SPRINGWATER	on	L9x1(2
I endorse Bill HAIGHT	as a candidate and declare	that I am qualified
to be an elector in this municipality		
, / (		
illun	Date (yyyy/mm/dd)	_
Signature	Date (yyyy/mm/dd)	
Name of person providing endorsement – 5		
Last Name or Single Name	Given Name(s)	
GIFFEN	5 Law	
Qualifying Address		
Suite/Unit Number   Street Number   Street Name	1 100	
25 36	Gronge Johnson RD	
Municipality	Province Ont	Postal Code L9 X 1C2
Tendorse Bill Haight,	as a candidate and declare	that I am qualified
to be an elector in this municipality.		
Shew Clle	June 23/22	
Signature	Date (yyyy/mm/dd)	_
วเนาสเนาซ	. Data (yyyy/iiipii/da)	

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Name of person providing endorsement – 6	
Last Name or Single Name	Given Name(s) GERRAD
SYONE	GEKRHIO.
Qualifying Address	
Suite/Unit Number   Street Number   Street Name   SNOW	LALLEY RD
Municipality SPRING WATER	Province Postal Code L9X 15
I endorse B/LL HA/6/A	as a candidate and declare that I am qualified
to be an elector in this municipality.	
Germa Som	June 22/2022
Signature	// Date (yyyy/mm/dd)
Name of person providing endorsement – 7	
Last Name or Single Name	Given Name(s)
Orugi	Jim
Qualifying Address	3/1/2/
Suite/Unit Number   Street Number   Street Name	
2056 Brown	BG. Road
Municipality Springwoter	Province Postal Code 49x 1x7
I endorse Bill Haight	as a candidate and declare that I am qualified
to be an elector in this municipality.	
	1 .
- Umy	z_0_22\06\22 Date (yyyy/mm/dd)
Signature	Date (yyyy/mm//dd)
	,
Name of person providing endorsement – 8	
Last Name or Single Name	Given Name(s)
Wirdu	K mhe wta
Qualifying Address	10.50
Suite/Unit Number Street Number Street Name	sell Rd
Municipality SPRING WATER	Province Postal Code LAXIR 2
lendorse Bill Haught	as a candidate and declare that I am qualified
to be an elector in this municipality.	
NO DAA	2022/06/22
Signature	Date (vvvv/mm/dd)

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44.	The state of the s	
Name of person providing endorsement – 9		
Last Name or Şingle, Name	Given Name(s)	
Wright	Kobert	
Qualifying Address		
Suite/Unit Number   Street Number   Street Name	11 Original	
2064 Russe	ell Road	
Municipality PRING WATER	Province ON	Postal Code
lendorse Bill Haight	as a candidate and decla	re that I am qualified
to be an elector in this municipality.		
Mux	2022/06/21	
Signature	2022   06   21 Date (yyyy/mm/dd)	
Oignataro		
N. C. Sandallan and an amount 40		
Name of person providing endorsement – 10	Given Name(s)	
Last Name or Single Name	Given Name(s)	
CRATTO		
Qualifying Address   Suite/Unit Number   Street Number   Street Name		
14 1	ARK TRAN	
Municipality	Province	Postal Code
M (Alters)	00	L9X.063
I endorse B/LL -HA/6K	as a candidate and declar	are that I am qualified
to be an elector in this municipality.	$\cap$	
	(1.2)/20	
Signature	Date (yyyy/mm/dd)	Military -
Signature	- Jake (yyyyininau)	
Name of person providing endorsement – 11	Given Name(s)	
Last Name or Single Name	Given Name(s)	
Moore	///chase	
Qualifying Address		
Suite/Unit Number Street Number Street Name	Irchard Road	
Municipality ~ ~	Province	Postal Code
Springwaler	OVI	VOM112
I endorse Bill Hayar	as a candidate and decl	are that I am qualified
to be an elector in this municipality		
1 // // ///	1	
1/1/1-1/1/1-10	1 2 22 - 20	2Z_

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- The qualifying address provided must include the postal code

rine qualifying address provided must include the postal con	
Name of person providing endorsement – 12  Last Name or Single Name	Given Name(s)
Qualifying Address Suite/Unit Number   Street Number   Street Name   O ? 7	CROSSLAND FD
Municipality SPRING WATER TWP	Province Postal Code
I endorse BILL HAIGHT	as a candidate and declare that I am qualified
to be an elector in this municipality.	-
for New	
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement – 13 Last Name or Single Name	Given Name(s)
Qualifying Address Suite/Unit Number   Street Number   Street Name   Str	nston Road
Municipality July July July July July July July Jul	Province Postal Code C91 2B1
I endorse Bill Haight	as a candidate and declare that I am qualified
to be an elector in this municipality.  Signature	2022 /07 /0 4 Date (yyyy/mm/dd)
Name of person providing endorsement – 14  Last Name or Single Name  / racely	Given Name(s)
Qualifying Address Suite/Unit Number   Street Number   Street Name   Street Number   Street Name   S	<i>b</i>
Municipality Minesing	Province Postal Code
I endorse Bill Haicht	as a candidate and declare that I am qualified
to be an elector in this municipality,	·
P	Suly 4/22
Signature	D <b>á</b> te (yyyy∕/mm/dd)

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Name of person providing endorsement – 15	
Last Name Single Name	Given Name(s) LARRY
MAW	LARRY
Qualifying Address	•
Suite/Unit Number Street Number Street Name	MINESING
3472 HWY 26	11101251106
Municipality SPRING WATTER	Province Postal Code L2X 086
I endorse BILL HAIGH	
to be an elector in this municipality.	
l , , , , , , , , , , , , , , , , , , ,	
Signature	Date (yyy/mm/dd)
) Signature	Date (yyyy/min/dd)
Name of person providing endorsement – 16	lo: vv Novo (s)
Last Name or Single Name	Given Name(s) RRAY
5011	711011011
Qualifying Address	
Suite/Unit Number   Street Number   Street Name   Street Name   Street Number   Street Name   Street	ROAD.
Municipality SPRINGWATER	Province ONT Postal Gode LYX / 7.
l endorse BILL HAVGAT	as a candidate and declare that I am qualified
to be an elector in this municipality.	1 , , , ,
Man Caral	July 11/2022
Signature	Date (vvvv/mm/dd)
Signature	p Dage (yyyymmpaa)
111 1 12	
Name of person providing endorsement – 17	Given Name(s)
Last Name or Single Name	Given Walle(s)
	The state of the s
Qualifying Address   Suite/Unit Number   Street Number   Street Name	_
3048 BARRIE HIC	
Municipality SPRINEW ATER	Province Postal Code 19/11
I endorse BILL HAIGHT	as a candidate and declare that I am qualified
to be an elector in this municipality.	. 1
a Sett	Jelly U/2Z
Signature	Date (yyyy/mm/dd)

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Name of person providing endorsement – 18	
Last Name or Single Name	Given Name(s)
SOHNSTON	KELTH.
Qualifying Address	
Suite/Unit Number   Street Number   Street Name	
2377 040 SEC	OND. ROAD NORTH
Municipality SPRINGWATER	Province Postal Code LOL-IPO
lendorse BILL HAIGH	as a candidate and declare that I am qualified
to be an elector in this municipality.	
2/4/1/1	
Keil Ghall	2022 July //
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement – 19	
Last Name or Single Name	Given Name(s)
Durntord	Erin Christine
Qualifying Address	· ·
Suite/Unit Number Street Number Street Name  2377040 560	OND ROAD NORTH
Municipality SPRING WATER	Province Postal Code LOC- 1 Po.
lendorse TS/LL HAIGHT	as a candidate and declare that I am qualified
to be an elector in this municipality	
( him (M) intend	omale III
- Van Grango Re	- Determinant
Signature/	Date (ýyyy/mm/dd)
·	
Name of person providing endorsement – 20	
Last Name or Single Name	Given Name(s)
BELLWOOD	LOUIS
Qualifying Address	
Suite/Unit Number Street Number Street Name	
Municipality SPRING WATER	Province Postal Code
l endorse 18/LL HAIGHT	as a candidate and declare that I am qualified
to be an elector in this municipality.	
	Ful 12 2022
Simahim	
Signature	Date (yyyy/mm/dd)

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Name of some or some differences described to the contract of		
Name of person providing endorsement – 21	Circon Nama(a)	
Last Name or Single Name	Given Name(s)	
Qualifying Address	1,400,01	
Suite/Unit Number   Street Number   Street Name	1 1 - 22 1	
44 PARR BLUO.	UTOPEA	
Municipality	Province	Postal Code
SPRING WATER	ON	LOM 172
i endorse BILC HAIGK	as a candidate and de	clare that I am qualified
to be an elector in this municipality.	· · · · · · · · · · · · · · · · · · ·	
01200	0.000	
HI SULLIVOR de «		
Signature	Date (yyyy/mm/dd)	
Name of person providing endorsement – 22	·	
Last Name or Single Name	Given Name(s)	
BELL WOOD.	SAX	
Qualifying Address		
Suite/Unit Number   Street Number   Street Name	1 1	
44 PARR BLUD.	UNOPIA.	
Municipality SPRING WATER	Province	Postal Code
1 300 0 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		LOM ITZ
l endorse BILL HAIC	as a candidate and de	clare that I am qualified
	as a candidate and de	
l endorse BILL HAIC	· · · · · · · · · · · · · · · · · · ·	
I endorse	2022.07.17	
l endorse BILL HAIC	· · · · · · · · · · · · · · · · · · ·	
I endorse  SILL HATE  to be an elector in this municipality.  Signature	2022.07.17	
I endorse  to be an elector in this municipality.  Signature  Name of person providing endorsement – 23	2022 . 07 . VZ Date (yyyy/mm/dd)	
I endorse  SILL HATE  to be an elector in this municipality.  Signature	2022 . 07 . VZ Date (yyyy/mm/dd)	
I endorse  to be an elector in this municipality.  Signature  Name of person providing endorsement – 23  Last Name or Single Name  OKA	2022.07.17	
I endorse  to be an elector in this municipality.  Signature  Name of person providing endorsement – 23  Last Name or Single Name  Out of Country Coun	2022 . 07 . VZ Date (yyyy/mm/dd)	
Name of person providing endorsement – 23 Last Name or Single Name  Qualifying Address Suite/Unit Number   Street Number   Street Name	2022 . 07 . VZ Date (yyyy/mm/dd)	
I endorse  to be an elector in this municipality.  Signature  Name of person providing endorsement – 23  Last Name or Single Name  Qualifying Address Suite/Unit Number Street Number  Street Name  Municipality	Date (yyyy/mm/dd)  Given Name(s)  ALE RD.	
I endorse to be an elector in this municipality.  Signature  Name of person providing endorsement – 23 Last Name or Single Name  Qualifying Address Suite/Unit Number   Street Number   Street Name	Date (yyyy/mm/dd)  Given Name(s)  ALE RD.	clare that I am qualified
I endorse  to be an elector in this municipality.  Signature  Name of person providing endorsement – 23  Last Name or Single Name  Qualifying Address Suite/Unit Number Street Number  Street Name  Municipality	Date (yyyy/mm/dd)  Given Name(s)  ALE RD.  Province	Postal Code
I endorse  to be an elector in this municipality.  Signature  Name of person providing endorsement – 23  Last Name or Single Name  Qualifying Address Suite/Unit Number   Street Number   Street Name  Municipality  Municipality  Municipality  Municipality	Date (yyyy/mm/dd)  Given Name(s)  ALE RD.  Province	Postal Code
I endorse to be an elector in this municipality.  Signature  Name of person providing endorsement – 23 Last Name or Single Name  Qualifying Address Suite/Unit Number   Street Number   Street Name    Municipality  Municipality  I endorse  I endorse	Date (yyyy/mm/dd)  Given Name(s)  Province  as a candidate and de	Postal Code L9X1W clare that I am qualified
I endorse to be an elector in this municipality.  Signature  Name of person providing endorsement – 23 Last Name or Single Name  Qualifying Address Suite/Unit Number   Street Number   Street Name    Municipality  Municipality  I endorse  I endorse	Date (yyyy/mm/dd)  Given Name(s)  Province  as a candidate and de	Postal Code

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Name of person providing endorsement – 24		
Last Name or Single Name	Given Name(s)	
Vander Lieter Henry.		
Qualifying Address		
Suite/Unit Number   Street Number   Street Name		
1831 1851 Golf Cour	seld	
Municipality	Province	Postal Code
Springwader	Ontario	29×047
lendorse Bill Haight.	as a candidate and declare	e that I am qualified
to be an elector in this manicipality.		
	0 0 7 12	
Jan Cardullal	20220712	_
Signature	Date (yyyy/mm/dd)	
Name of person providing endorsement – 25		
Last Name or Single Name	Given Name(s)	
Spring John	John Mitto	~ Spring
Qualifying Address		
Suite/Unit Number   Street Number   Street Name	د	,
	2 97	
Municipality	Province	Postal Code
Springwater	00	LOL 100
1 - 1 + 1		
I endorse 18.11 It aight	as a candidate and declare	e that i am quaimed
to be an elector in this municipality.		
And the second of the second o	10 10 0000	•
	July 12, 20 22	Total Control
Signature	Date (yyyy/mm/dd)	

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