

**Instructions**

It is the responsibility of the person being nominated to file a complete and accurate nomination paper. Please print or type information (except signatures).

Nomination paper of a person to be a candidate at an election to be held in the following municipality

SPRINGWATER TOWNSHIP

Nominated for the Office of

COUNCILLOR

Ward Name or Number (if any)

WARD 4

Nominee's name as it is to appear on the ballot paper (subject to agreement of the municipal clerk)

Last Name or Single Name

SMITH

Given Name(s)

LINDA

Nominee's full qualifying address within municipality

Suite/Unit Number

Street Number

Street Name

4

EDER TRAIL

Municipality

SPRINGWATER

Province

ONTARIO

Postal Code

L9X0G8

Mailing Address

Same as qualifying address

Suite/Unit Number

Street Number

Street Name

Municipality

Province

Postal Code

If nominated for school board, full address of residence within its jurisdiction

Suite/Unit Number

Street Number

Street Name

Municipality

Province

Postal Code

Email Address

linda@springwater@gmail.com

Telephone Number

Telephone Number 2

705 791-0657

**Declaration of Qualification**

I, LINDA SMITH, declare that I am presently legally qualified

(or would be presently legally qualified if I were not a member of the Legislative Assembly of Ontario or the Senate or House of Commons of Canada) to be elected and to hold the office for which I am nominated.

Linda Smith  
Signature of Nominee

2022/07/04  
Date (yyyy/mm/dd)

Date Received (yyyy/mm/dd)

2022/07/04

Time Received

3:34PM

Initial of Nominee or Agent  
(if filed in person)

Linda Smith

Signature of Clerk or Designate

[Signature]

**Certification by Clerk or Designate**

I, the undersigned clerk of this municipality, do hereby certify that I have examined the nomination paper of the aforesaid nominee filed with me and am satisfied that the nominee is qualified to be nominated and that the nomination complies with the Act.

Signature

Date Certified (yyyy/mm/dd)