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.

Name of person seeking nomination	
Last Name or Single Name HORGAN	Given Name(s) FRANCIS
Endorsement signatures for the nomination of a person for an of	ffice in the municipality of
SPRINGWATER TOWNSHIP	in the year 2022
Name of person providing endorsement – 1	
Last Name or Single Name STROUD	Given Name(s) RUSS
Qualifying Address Suite/Unit Number Street Number Street Name STO	OWE ST.
Municipality SPRIWG-WATER	Province Postal Code CUC (A)
I endorse FRANCIS HORGAN	as a candidate and declare that I am qualified
to be an elector in this multicipality. Signature	Date (x)yy/mm/dd)
Name of person providing endorsement – 2	
Last Name or Single Name STROUD	Given Name(s) KAREN
Qualifying Address Suite/Unit Number Street Number Street Name Str	TONE ST
Municipality SPRING WATER	Province Postal Code LOCIPO
I endorse FRANCIS HORGAN	as a candidate and declare that I am qualified
to be an elector in this municipality. Signature	Jaly 06, 2022) Date (yyyy/mm/dd)

- 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.

Name of person providing endorsement – 3		
Last Name or Single Name	Given Name(s) WEW	
Last Name or Single Name HOCKIN	NEW	:
Qualifying Address		
Suite/Unit Number Street Number Street Name	- · · · · · · · · · · · · · · · · · · ·	
	TY 6092	
Municipality SPRINGWATER	Province OUT	Postal Code
1 endorse FRANCIS HORGAN	as a candidate and declare	
to be an elector in this municipality.		
	X111 1 122	
Kernell Signature Chin.	JU146122	-
Signature	Date (yyyy/mm/dd)	
Name of person providing endorsement – 4		
Last Name or Single Name	Given Name(s)	
KINTIL	NOD NOD	
Qualifying Address	_	
Suite/Unit Number Street Number Street Name Street	ES RD	
	Province	Postal Code
Municipality SPNIWGWATER	ON	LOC 1PO
I endorse FRANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality		
Q. Profes	Jul1 6/22	
Signature	Date (yyyy/mm/dd)	_
Olgriature	Date (уууулттид)	
r.,	<u> </u>	
Name of person providing endorsement – 5	1	
	Given Name(s)	
Siemer	K oxanne	······································
Qualifying Address		
Suite/Unit Number Street Number Street Name	(2)	
Municipality Phelpston Springwaker	Province	Postal Code
I endorse FRANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.		
	0000/00/12	
h:	= $2000/01/5$	
Signature	Date (yyyy/mm/dd)	

Municipal Elections Act, 1996 (Section 33)

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· Candidates must obtain 25 original signatures.

Name of person seeking nomination

- 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.

Last Name or Single Name	Given Name(s) FRANCIS	
Endorsement signatures for the nomination of a person for an of	fice in the municipality of	
SPRINGWATER	in the year <u>ZOZZ</u>	
Name of person providing endorsement – 1 Last Name or Single Name HUWTER	Given Name(s)	4.5.
	JOHN	
Qualifying Address Suite/Unit Number Street Number Street Name CITC	Province ON	
Municipality ELMUALE	Province OW	Postal Code
I endorse FIAINCIS HORGAN	as a candidate and declare t	that I am qualified
to be an elector in this municipality.		
Jh (bhan Signature	Date (yyyy/mm/dd)	
// Signature	Date (yyyy/mm/dd)	
\		
Name of person providing endorsement – 2 Last Name or Single Name Peace	Given Name(s) Roseanne	!
Qualifying Address Suite/Unit Number Street Number Street Name Ritchie Municipality Elmual		
Municipality Elmuale	Province ON	Postal Code
I endorse FRANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality. Roslame Lecrue Signature	2022/07/17 Date (yyyy/mm/dd)	

- Candidates must obtain 25 original signatures.
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Name of person providing endorsement – 3		
Last Name or Single Name	Given Name(s) 2	
Pearce	Given Name(s) Brian	
Qualifying Address		,
Suite/Unit Number Street Number Street Name , ,		
63 · Ritchi	e Cres	
Municipality	Province	Postal Code
Suite/Unit Number Street Number Street Name Ki+chi Municipality Elmual	ON	LOLIPO
1 endorse FVAIUCIS HOROAIU	as a candidate and declare	that I am qualified
to be an elector in this municipality.		
$A - \{\}$	2 - 1 1	
Buen freen	2022 07 17 Date (vvvv/mm/dd)	
' Signâture	Date (yyyy/mm/ɗd)	
Name of person providing endorsement – 4		
Last Name or Single Name	Given Name(s)	
DoRSâlU	E/	
Qualifying Address		
Suite/Unit Number Street Number Street Name		
158 QUETV ST U	ν	
Municipality £LMVALE	Province <i>ON 1 AR10</i>	Postal Code
Tendorse FRANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.		
Q/ <i>NU</i> ,	+1.11. 15/20	
W My	34/4 17/22	_ ^
(Signature	Date (yyyy/mm/dd)	
Name of person providing endorsement – 5		
	Given Name(s)	
COLUMBUS	PONALD	
Qualifying Address		
Suite/Unit Number Street Number Street Name		
19 Qsee	W STW	
Municipality ECM V, +CE	Province	Postal Code
Tendorse FIANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector-in this municipality.		
Woundle deleuter	501117122	
Signature	Date (yyyy/mm/dd)	-

Municipal Elections Act, 1996 (Section 33)

Instructions

- Candidates must obtain 25 original signatures.
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- The qualifying address provided must include the postal code.

Name of person seeking nomination	
Last Name or Single Name HORGAN	Given Name(s) FRANCIS
Endorsement signatures for the nomination of a person for an of	fice in the municipality of
SPRINGWATER TOWNSHIP	in the year 2022
Name of person providing endorsement – 1	
Last Name or Single Name MASOW	Given Name(s) VICTOR
Qualifying Address Suite/Unit Number Street Number Street Name MAA	Elow CIECIE
Municipality HILLSDALE	Province OWT Postal Code LOC/1/10
I endorse FRANCIS HORGAN	as a candidate and declare that I am qualified
to be an elector in this municipality.	
W 10 KIN	JU14 5/2022
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement – 2	
Last Name or Single Name	Given Name(s) BPATRICIA
Qualifying Address	
Suite/Unit Number Street Number Street Name	Orr Lake Ad
Municipality Springwaler	Province Postal Code LOLIFO
I endorse FRANCIS HORGAN	as a candidate and declare that I am qualified
to be an elector in this municipality.	
Alcon	JU14 S 2027
Signature	Date (yyyy/mm/dd)

- Candidates must obtain 25 original signatures.
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- The qualifying address provided must include the postal code.

Name of person providing endorsement – 3		
Last Name or Single Name	Given Name(s)	
17tzgevald	Given Name(s) THSON Paul	
Qualifying Address		
Suite/Unit Number Street Number Street Name	2	
Suite/Unit Number Street Number Street Name Ritchie Municipality	Crescont	
Municipality	Province	Postal Code
	ONTAVLO	LOLIPO
I endorse FRANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.		
- am tolk	2022/07/07 Date (vyvy/mm/dd)	_
Signature	Date (y√yy/mm/dd)	
Name of person providing endorsement – 4		
Last Name or Single Name	Given Name(s)	
Fitzgerald	Laura Anne	
Qualifying Address		
Suite/Unit Number Street Number Street Name		
60 Ritchie Cr	۴۲	
Municipality	·	
I wunicipality — ·	Province	Postal Code
Municipality Spring water	Province	Postal Code
Springwater	Province	LOLIPO
I endorse FRANCIS HORGAN	Province	LOLIPO
I endorse FRANCIS HORGAIN to be an elector in this municipality.	as a candidate and declare	LOLIPO
I endorse FRANCIS HORGAIN to be an elector in this municipality.	as a candidate and declare	LOLIPO
I endorse FRANCIS HORGAN	as a candidate and declare	LOLIPO
I endorse FRANCIS HORGAIN to be an elector in this municipality.	as a candidate and declare	LOLIPO
I endorse FRANCIS HORGAN to be an elector in this municipality. **Education of the content of	as a candidate and declare	LOLIPO
I endorse FRANCIS HORGAN to be an elector in this municipality. Laura Fitzgerald Signature Name of person providing endorsement – 5	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd)	LOLIPO
I endorse FRANCIS HORGAN to be an elector in this municipality. **Education of the content of	as a candidate and declare	LOLIPO
I endorse FRANCIS HORGAN to be an elector in this municipality. Laura Fitzgerald Signature Name of person providing endorsement – 5	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd)	LOLIPO
I endorse FRANCIS HORGAIU to be an elector in this municipality. Laura Fitzgerald Signature Name of person providing endorsement – 5 Last Name or Single Name Qualifying Address Suite/Unit Number Street Number St	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd) Given Name(s) 7/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	LOLIPO
I endorse FRANCIS HORGAIU to be an elector in this municipality. Laura Fitzgerald Signature Name of person providing endorsement – 5 Last Name or Single Name Qualifying Address Suite/Unit Number Street Number St	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd)	LOLIPO
I endorse FRANCIS HORGAIU to be an elector in this municipality. Laura Fitzgerald Signature Name of person providing endorsement – 5 Last Name or Single Name Columbus Qualifying Address Suite/Unit Number Street Number Street Name Columbus Street Name Columbus Street Name Columbus Co	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd) Given Name(s) TIM Drawings	LOLIFO that I am qualified
I endorse FRANCIS HORGAIU to be an elector in this municipality. Laura Fitzgerald Signature Name of person providing endorsement – 5 Last Name or Single Name Qualifying Address Suite/Unit Number Street Number Street Name Gle	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd) Given Name(s) 7/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	that I am qualified Postal Code
I endorse FRANCIS HORGAIU to be an elector in this municipality. Raura Fitzgerald Signature Name of person providing endorsement – 5 Last Name or Single Name Qualifying Address Suite/Unit Number Street Number Street Name Municipality ELMUACE	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd) Given Name(s) TIM Drawings	that I am qualified Postal Code CUC (PO)
I endorse FRANCIS HORGAIU to be an elector in this municipality. Raura Fitzgerald Signature Name of person providing endorsement – 5 Last Name or Single Name O UMBUS Qualifying Address Suite/Unit Number Street Number Street Name Municipality ELMUACE I endorse FRANCIS HORGAIU	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd) Given Name(s) TIM WULEW AUE Province OW	that I am qualified Postal Code CUC (PO)
I endorse FRANCIS HORGAIU to be an elector in this municipality. Raura Fitzgerald Signature Name of person providing endorsement – 5 Last Name or Single Name Qualifying Address Suite/Unit Number Street Number Street Name Municipality ELMUACE	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd) Given Name(s) TIM WULLW AUE Province Ow as a candidate and declare	that I am qualified Postal Code CUC (PO)
I endorse FRANCIS HORGAIU to be an elector in this municipality. Raura Fitzgerald Signature Name of person providing endorsement – 5 Last Name or Single Name O UMBUS Qualifying Address Suite/Unit Number Street Number Street Name Municipality ELMUACE I endorse FRANCIS HORGAIU	as a candidate and declare 2022/07/07 Date (yyyy/mm/dd) Given Name(s) TIM WULEW AUE Province OW	that I am qualified Postal Code CUC (PO)

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Name of person providing endorsement – 3		
Last Name or Single Name	Given Name(s)	
Last Name of Single Name KENNERY	Given Name(s) JOHN	
Qualifying Address		
Suite/Unit Number Street Number Street Name		
VIF	ELICES LAWE	
Municipality	1 Province	Postal Code
SPRINGWATER	Ow	LUCIPO
I endorse FRANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.		
(shot bout)	JULYSROER	
Signature	Date (yyyy/mm/dd)	-
J Gignature \		
Name of person providing endorsement – 4	loissa News (s)	
Last Name or Single Name BOYCE	Given Name(s) B/CC	
Qualifying Address		
Suite/Unit Number Street Number Street Name		
8 LOK	INE SI	
Municipality SPRINGWATER	Province OW	Postal Code
I endorse FRANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.	-	
2110/	T. 14 5 20 33	
Bill Bogle	<u> </u>	
&ignature	Date (yyyy/mm/dd)	
p		
Name of person providing endorsement – 5		
Last Name or Single Name	Given Name(s)	
Wi Gill	CLAIR	
Qualifying Address		
Suite/Unit Number Street Number Street Name SASI	ELIWE RD.	
Municipality	Province	Postal Code
SPRINGWATER	OUT	COLIPO
I endorse FRANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.		
Com Milato	JULY 5 2022	
Signature	Date (vvvv/mm/dd)	-



Municipal Elections Act, 1996 (Section 33)

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Name of person seeking nomination			
Last Name or Single Name HORGAN	Given Name(s) FRANCIS		
Endorsement signatures for the nomination of a person for an of	ffice in the municipality of		
SPRINGWATER TOWNSHIP	in the year $\frac{2022}{}$		
Name of person providing endorsement – 1			
Last Name or Single Name RITCHIE	Given Name(s) JOHN		
Qualifying Address Suite/Unit Number Street Number Street Name LAU	USON AUE.		
Municipality SPRINGWATER	Province Postal Code LOC / PO		
I endorse FRANCIS HORGAN	as a candidate and declare that I am qualified		
to be an elector in this municipality. Signature	JU145 2022 Date (yyyy/mm/dd)		
Name of person providing endorsement – 2 Last Name or Single Name KEWNEDY	Given Name(s) ROBELT		
Qualifying Address Suite/Unit Number Street Number Street Name Queen ST w.			
Municipality SPRINGWATTER	Province ON Postal Code COLIPO		
I endorse FRANCIS HORGAN	as a candidate and declare that I am qualified		
to be an elector in this municipality.			
Signature	JUNE 5 2027 Date (yyyy/mm/dd)		
Signature	Date (yyyymmidd)		

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Name of person seeking nomination	
Last Name or Single Name HORGAN	Given Name(s) FRANCIS
Endorsement signatures for the nomination of a person for an o	
SPRINGWATER	in the year ZOZZ
Name of person providing endorsement – 1	
Last Name or Single Name	Given Name(s)
Kirkpotrick	Mike
Qualifying Address	
Suite/Unit Number Street Number Street Name	
7 Honden	Province Postal Code
Municipality	Province Postal Code 404 IPO
folm vale	
I endorse FRANCIS HURBAN	as a candidate and declare that I am qualified
to be an elector in this municipality.	
14	
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement – 2	
Last Name or Single Name	Given Name(s)
Gerow	Julie
Qualifying Address	
Suite/Unit Number Street Number Street Name	
#1 13 Queen S	7.
Municipality Elmvale	Province Postal Code
	OUT 1202 170
I endorse FIAIUCIS HORGAN	as a candidate and declare that I am qualified
to be an elector in this municipality.	1 1
() l'es dessus	2022 107/17
Signature	Date (yyyy/mm/dd)

- Candidates must obtain 25 original signatures.
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, , , , , , , , , , , , , , , , , , , ,		
Name of person providing endorsement – 3		
Last Name or Single Name	Given Name(s) Awp 1	
Qualifying Address		•
Suite/Unit Number Street Number Street Name	Province OW	
	Province OW	Postal Code WLIPD
I endorse FIAIUCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.	JUL18/27 Date (yyyy/mm/dd)	
Signature	Date (yyyy/mm/dd)	-
Name of person providing endorsement – 4 Last Name or Single Name Belcourt	Given Name(s)	
Qualifying Address		
Suite/Unit Number Street Number Street Name Street Number Street Name Street	10E Elmuate	
Municipality Springwater	Province ON	Postal Code LOL I PO
Tendorse FIANCIS HURGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.		·
I Bel count	2022 07 18 Date (yyyy/mm/dd)	
Signature	Date (yyyy/mm/dd)	
Name of person providing endorsement – 5	la: v	
Last Name or Single Name MAYIM	Given Name(s)	
	N6 ST W	
Municipality ELMVACE ART6	Province ONT	Postal Code Lo L / PO
I endorse FIANCIS HORGAN	as a candidate and declare	that I am qualified
to be an elector in this municipality.	1	
JU14 18 127 Done M	aprim July 18/22	

Signature

Date (yyyy/mm/dd)



Ministry of Municipal Affairs and Housing

Endorsement of Nomination – Form 2

Municipal Elections Act, 1996 (Section 33)

Instructions

- Candidates must obtain 25 original signatures.
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Name of person seeking nomination		
Last Name or Single Name HORGAN	Given Name(s) FIANCO	\$
Endorsement signatures for the nomination of a person for an	office in the municipality of	
SPRINGWATER	in the year 2027	
Name of person providing endorsement – 1	1	
Last Name or Single Name	Given Name(s)	
Murray	Lhinola	
Qualifying Address Suite/Unit Number Street Number Street Name		
Municipality	Cres.	
Municipality Canada Character 19	Province	Postal Code
SPRINGWATER	ON 7	LOLIPO
I endorse FRANCIS HORGAN	as a candidate	e and declare that I am qualified
to be an elector in this municipality.	4	
- Amag Mussey	Date (yyyy/mm	2022 n/dd)
Name of person providing endorsement – 2	1	
Last Name or Single Name	Given Name(s)	
Daoust	Alyx	
Qualifying Address Suite/Unit Number Street Number Street Name Street Name	eTANG-VISHENE RD	
Municipality HILLS DACE	Province OW	Postal Code
I endorse Flancis HORGAN	as a candidate	e and declare that I am qualified
to be an elector in this municipality.		
	JUH 18/22	•
Signature	Date (yyyy/mn	

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- The qualifying address provided must include the postal code.

Name of person seeking nomination						
Last Name or Single Name	Given Name(s) FIANCIS					
HORG-AW						
Endorsement signatures for the nomination of a person for an office in the municipality of						
SPRINGUATER	in the year 7027					
Name of person providing endorsement – 1						
Last Name or Single Name	Given Name(s)					
Grenner	'Kyan					
Qualifying Address						
Suite/Unit Number Street Number Street Name	biv					
Municipality \	Province Postal Code					
Phelodon Springunter	ON 1-01-2K0					
I endorse	as a candidate and declare that I am qualified					
to be an elector in this municipality.						
4	0020/07/13					
Signature	Date (vvvv/mm/dd)					
Signature						
Name of person providing endorsement – 2						
Last Name or Single Name	Given Name(s)					
1 · ·	Domini (
Martiner - McCready	1 1 and 2					
Qualifying Address Suite/Unit Number Street Number Street Name						
Suite/Onlit Number Street Number Street Number Flor	Province Postal Code					
Seringwater	000					
I endorse DUMINIC MAYHINE 2 - MCLY equily as a candidate and declare that I am qualified						
to be an elector in this municipality.						
men	2022/07/13					
Signature	Date (yyyy/mm/dd)					

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- The qualifying address provided must include the postal code.

Name of person providing endorsement – 3						
Last Name or Single Name			Given Name(s) FANCIS			
		GAN	l	MUCIS		
Qualifying Address						
Suite/Unit Number	Street Number	Street Name				
	, ,					
Municipality			Province		Postal Code	
I endorse as a candidate and declare that I am qualified						
to be an elector in	this municipality			, a danaman ana adam.	mac i am quamica	
to be an elector in	this mumorpanty.					
	Signati	ure	- <u>D</u> a	ate (yyyy/mm/dd)	-	
	<u> </u>		_	(7) ////////////////////////////////////		
Name of page		· · · · · · · · · · · · · · · · · · ·				
	n providing end	orsement – 4	I			
Last Name or Sing			Given Name(s)	4		
	Y FRS		KALPH	WESCEY	/	
Qualifying Address			·	77.		
Suite/Unit Number	Street Number	Street Name				
6	19	STONE				
Municipality			Province		Postal Code	
th	MVALE		ONT		LOL-180	
I endorse FRANCIS HORGAN as a candidate and declare that I am qualified						
to be an elector in t						
N/	of a					
1 61	M S Cost da		2132	2/07/18	4	
Signature			Da	ate (yyyy/mm/dd)	•	
<u> </u>						
Name of perso	n providing end	oreement _ 5				
Last Name or Singl		Olgenient – 2	Civan Namo(a)			
Last Hairle of Olingi	5 Name	ı	Given Name(s)			
Overlife the at Address						
Qualifying Address Suite/Unit Number		100 11				
Suite/Onit Mumber	Street Number	Street Name				
N # ? 1	L		T: .			
Municipality		!	Province		Postal Code	
l endorse			as	a candidate and declare	that I am qualified	
to be an elector in this municipality.						
to be an elector in this municipality.						
	Signatu	ure	- De	ite (yyyy/mm/dd)		