

**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).

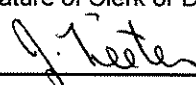
Nomination paper of a person to be a candidate at an election to be held in the following municipality The Township of <del>Springwater</del> <u>Oro-Medonte</u> <span style="float:right">(H)</span>			
Nominated for the Office of SCDSB Trustee <u>- English Public</u> <span style="float:right">(H)</span>		Ward Name or Number (if any)	
Nominee's name as it is to appear on the ballot paper (subject to agreement of the municipal clerk)			
Last Name or Single Name Tkachyk		Given Name(s) Tyler	
Nominee's full qualifying address			
Suite/Unit Number	Street Number 12	Street Name Corbett St	
Municipality Elmvale		Province Ontario	Postal Code L0L1P0
Mailing Address <input checked="" type="checkbox"/> Same as qualifying address			
Suite/Unit Number	Street Number	Street Name	
Municipality		Province	Postal Code
Email Address tytkachyk@gmail.com		Telephone Number 647-515-5321	Telephone Number 2

**Declaration of Qualification**

I, Tyler James Tkachyk, 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.

  
Signature of Nominee (H)

2026/06/24 (H)  
Date (yyyy/mm/dd)

Date Received (yyyy/mm/dd) <u>2026/06/24</u>	Time Received <u>8:45 a.m.</u>	Initial of Nominee or Agent (if filed in person) <u>H</u>	Signature of Clerk or Designate 
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**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)

Save Form

Print Form

Clear Form