

Instructions


- Candidates must obtain a minimum of 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.

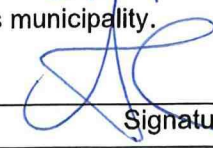
Personal information collected on this form is obtained under the authority of sections 33 and 95 of the *Municipal Elections Act, 1996*. Under section 88 of the *Municipal Elections Act, 1996* (and despite anything in the *Municipal Freedom of Information and Protection of Privacy Act*) documents and 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 nomination

Last Name or Single Name <u>CAMPBELL</u>	Given Name(s) <u>MIKE</u>
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Endorsement signatures for the nomination of a person for an office in the municipality of SPRING WATER in the year 2016.

Name of person providing endorsement – 1			
Last Name or Single Name <u>THOMPSON</u>		Given Name(s) <u>LORNE STEPHEN</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>21</u>	Street Name <u>ALBERT ST W.</u>	
Municipality <u>SPRING WATER</u>	Province <u>ON</u>		Postal Code <u>L0L1V0</u>
I endorse <u>MIKE CAMPBELL</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
 Signature		<u>2016/04/30</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

Name of person providing endorsement – 2			
Last Name or Single Name <u>Cameron</u>		Given Name(s) <u>Audrea</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>21</u>	Street Name <u>Albert street west</u>	
Municipality <u>Hillsdale</u>	Province <u>Ontario</u>		Postal Code <u>L0L1V0</u>
I endorse <u>Mike Campbell</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
 Signature		<u>2016/04/30</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

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Name of person seeking nomination

Last Name or Single Name

[Handwritten signature]

Given Name(s)

[Handwritten signature]

Endorsement signatures for the nomination of a person for an office in the municipality of _____ in the year _____.

Name of person providing endorsement – 1

Last Name or Single Name

LETOURNEM

Given Name(s)

KELLY

Qualifying Address

Suite/Unit Number

Street Number

Street Name

4539

PENETANAWI SIDENE RD.

Municipality

(HILLSIDE SPRINGWATER)

Province

ONTARIO

Postal Code

L0L1V0

I endorse *MIKE CAMPBELL* as a candidate and declare that I am qualified to be an elector in this municipality.

[Handwritten signature]

Signature

2026/04/29

Date (yyyy/mm/dd)

Delete

Name of person providing endorsement – 2

Last Name or Single Name

McEwan

Given Name(s)

Heidi

Qualifying Address

Suite/Unit Number

Street Number

Street Name

1434

Fios Rd 7 E.

Municipality

Springwater

Province

ON

Postal Code

L0L1P0

I endorse *Mike Campbell* as a candidate and declare that I am qualified to be an elector in this municipality.

[Handwritten signature]

Signature

2026/04/29

Date (yyyy/mm/dd)

Delete

Name of person providing endorsement – 3			
Last Name or Single Name Mooney		Given Name(s) Kirsty	
Qualifying Address			
Suite/Unit Number	Street Number 19	Street Name Lawson Ave Elmvalle	
Municipality Springwater		Province ON	Postal Code L0L1P0
I endorse <u>Mike Campbell</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>K Mooney</u> Signature		<u>2026/04/29</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

Name of person providing endorsement – 4			
Last Name or Single Name Mooney		Given Name(s) Nathan	
Qualifying Address			
Suite/Unit Number	Street Number 19	Street Name Lawson Ave Elmvalle	
Municipality Springwater		Province ON	Postal Code L0L1P0
I endorse <u>Mike Campbell</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>Nathan Mooney</u> Signature		<u>2026/04/29</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

Name of person providing endorsement – 5			
Last Name or Single Name Clement		Given Name(s) Bonnie	
Qualifying Address			
Suite/Unit Number	Street Number 15	Street Name Riverview Cr. Elmvalle	
Municipality Springwater		Province ON	Postal Code L0L1P0
I endorse <u>Mike Campbell</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>Bonnie Clement</u> Signature		<u>2026/04/29</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

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Name of person seeking nomination

Last Name or Single Name

Given Name(s)

Endorsement signatures for the nomination of a person for an office in the municipality of _____
in the year _____.

Name of person providing endorsement – 1

Last Name or Single Name

Given Name(s)

Qualifying Address

Suite/Unit Number

Street Number

Street Name

Municipality

Province

Postal Code

I endorse Mike Campbell as a candidate and declare that I am qualified to be an elector in this municipality.

Caleb Bule
Signature

2026/04/29
Date (yyyy/mm/dd)

Delete

Name of person providing endorsement – 2

Last Name or Single Name

Given Name(s)

Qualifying Address

Suite/Unit Number

Street Number

Street Name

Municipality

Province

Postal Code

I endorse Mike Campbell as a candidate and declare that I am qualified to be an elector in this municipality.

Ashley Brohm
Signature

2026/04/29
Date (yyyy/mm/dd)

Delete

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Name of person seeking nomination

Last Name or Single Name _____ Given Name(s) _____

Endorsement signatures for the nomination of a person for an office in the municipality of _____ in the year _____

Name of person providing endorsement – 1

Last Name or Single Name LIGHTHEART Given Name(s) LAURA

Qualifying Address
Suite/Unit Number _____ Street Number 9 Street Name Anthony Crt.

Municipality Springwater Province ON Postal Code L9X0T1

I endorse Mike Campbell as a candidate and declare that I am qualified to be an elector in this municipality.

J. Lightheart
Signature

2026 04 28
Date (yyyy/mm/dd)

Delete

Name of person providing endorsement – 2

Last Name or Single Name Lighthouse Given Name(s) Ella

Qualifying Address
Suite/Unit Number _____ Street Number 9 Street Name Anthony Crt.

Municipality Springwater Province ON Postal Code L9X0T1

I endorse Mike Campbell as a candidate and declare that I am qualified to be an elector in this municipality.

E Lightheart
Signature

2026 04 28
Date (yyyy/mm/dd)

Delete

Name of person providing endorsement - 3

Last Name or Single Name

MACEPHERSON

Given Name(s)

RONDA LYNN

Qualifying Address

Suite/Unit Number

Street Number

Street Name

3

ANTHONY COURT

Municipality

SPRINGWATER

Province

ON

Postal Code

L9X 0T1

I endorse

MIKE CAMPBELL

as a candidate and declare that I am qualified

to be an elector in this municipality.

[Signature]

Signature

2026/04/28

Date (yyyy/mm/dd)

Delete

Name of person providing endorsement - 4

Last Name or Single Name

LEA

Given Name(s)

Edward John

Qualifying Address

Suite/Unit Number

Street Number

Street Name

12

Galkgher Crescent

Municipality

Midhurst

Province

ON

Postal Code

L9X 0K1

I endorse

Mike Campbell

as a candidate and declare that I am qualified

to be an elector in this municipality.

[Signature]

Signature

2026/04/29

Date (yyyy/mm/dd)

Delete

Name of person providing endorsement - 5

Last Name or Single Name

miller

Given Name(s)

Deborah

Qualifying Address

Suite/Unit Number

Street Number

Street Name

19

Lilac Lane

Municipality

midhurst

Province

ON

Postal Code

L9X 0W4

I endorse

MIKE CAMPBELL

as a candidate and declare that I am qualified

to be an elector in this municipality.

[Signature]

Signature

2026/04/29

Date (yyyy/mm/dd)

Delete

Add Person (+)

Save Form

Print Form

Clear Form

Name of person providing endorsement – 3			
Last Name or Single Name <u>Lapensee</u>		Given Name(s) <u>Nancy</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>48</u>	Street Name <u>YONGE ST N</u>	
Municipality <u>SPRINGWATER</u>		Province <u>ON</u>	Postal Code <u>L9L 1P0</u>
I endorse <u>Mike Campbell</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
<u>[Signature]</u> Signature		<u>2026/04/28</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

Name of person providing endorsement – 4			
Last Name or Single Name <u>Lalonde</u>		Given Name(s) <u>Carla</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>14</u>	Street Name <u>Kerr St.</u>	
Municipality <u>Springwater</u>		Province <u>ON</u>	Postal Code <u>L9L 1P0</u>
I endorse <u>Mike Campbell</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
<u>[Signature]</u> Signature		<u>2026/04/28</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

Name of person providing endorsement – 5			
Last Name or Single Name <u>Lighthouse</u>		Given Name(s) <u>Joel</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>9</u>	Street Name <u>ANTHONY COURT</u>	
Municipality <u>Springwater</u>		Province <u>ON</u>	Postal Code <u>L9X 0T1</u>
I endorse <u>Mike Campbell</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
<u>[Signature]</u> Signature		<u>2026/04/28</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

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Name of person seeking nomination

Last Name or Single Name McGinnis Given Name(s) Tim

Endorsement signatures for the nomination of a person for an office in the municipality of Elmville in the year 2026

Name of person providing endorsement – 1

Last Name or Single Name McGinnis Given Name(s) Tim

Qualifying Address
Suite/Unit Number 1-29 Street Number #29 Street Name QUEEN STREET EAST

Municipality ELMVILLE Province ONTARIO Postal Code

I endorse MIKE CAMPBELL as a candidate and declare that I am qualified to be an elector in this municipality.

Tim McGinnis Signature Date (yyyy/mm/dd) 2026 04 28

Delete

Name of person providing endorsement – 2

Last Name or Single Name MacPherson Given Name(s) Darren

Qualifying Address
Suite/Unit Number 301 Street Number 21 Street Name YONGE ST NORTH

Municipality ELMVILLE Province ON Postal Code L0L1P0

I endorse MIKE CAMPBELL as a candidate and declare that I am qualified to be an elector in this municipality.

[Signature] Signature Date (yyyy/mm/dd) 2026 04 28

Delete

Name of person providing endorsement – 3

Last Name or Single Name Cameron Given Name(s) Austin

Qualifying Address
Suite/Unit Number | Street Number | Street Name
 | 21 | Albert St W

Municipality Springwater Province Ontario Postal Code L0L1V0

I endorse Mike Campbell as a candidate and declare that I am qualified to be an elector in this municipality.

Austin Cameron Signature 2026/04/30 Date (yyyy/mm/dd)

Name of person providing endorsement – 4

Last Name or Single Name THOMPSON Given Name(s) LAURA LEE

Qualifying Address
Suite/Unit Number | Street Number | Street Name
 | 21 | Albert St. W

Municipality Springwater Province ON Postal Code L0L1V0

I endorse Mike Campbell as a candidate and declare that I am qualified to be an elector in this municipality.

[Signature] Signature 2026/05/01 Date (yyyy/mm/dd)

Name of person providing endorsement – 5

Last Name or Single Name _____ Given Name(s) _____

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.

Signature _____ Date (yyyy/mm/dd)

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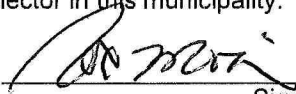
Name of person seeking nomination

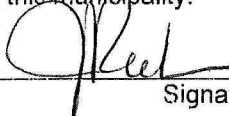
Last Name or Single Name <u>DEBIASIO</u>	Given Name(s) <u>VIC</u>
---	-----------------------------

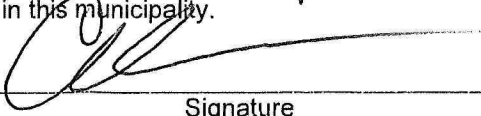
Endorsement signatures for the nomination of a person for an office in the municipality of
[Signature] in the year 2024


Name of person providing endorsement – 1			
Last Name or Single Name <u>DEBIASIO</u>		Given Name(s) <u>VIC</u>	
Qualifying Address			
Suite/Unit Number <u>[Signature]</u>	Street Number <u>14</u>	Street Name <u>LOFTUS RD</u>	
Municipality <u>PHELPSTON</u>	Province <u>ONT</u>	Postal Code	
I endorse _____ as a candidate and declare that I am qualified to be an elector in this municipality.			
_____ Signature		_____ Date (yyyy/mm/dd)	
<input type="button" value="Delete"/>			


Name of person providing endorsement – 2			
Last Name or Single Name		Given Name(s)	
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.			
_____ Signature		_____ Date (yyyy/mm/dd)	
<input type="button" value="Delete"/>			

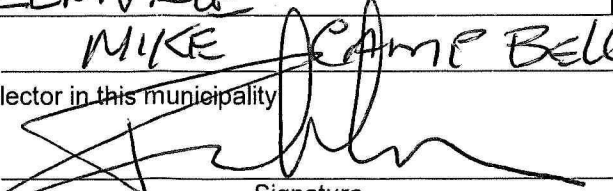
Name of person providing endorsement – 3			
Last Name or Single Name <u>MOZER</u>		Given Name(s) <u>JOE</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>164</u>	Street Name <u>2274722 CRES</u>	
Municipality <u>SPRINGWATER</u>		Province <u>ONTARIO</u>	Postal Code <u>L0L 1A0</u>
I endorse <u>MIKE CAMPBELL</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
 Signature		<u>APR 25 / 2026</u> Date (yyyy/mm/dd)	


Name of person providing endorsement – 4			
Last Name or Single Name <u>PECK</u>		Given Name(s) <u>Janine</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>52</u>	Street Name <u>Idlewood Drive</u>	
Municipality <u>Midhurst</u>		Province <u>ON</u>	Postal Code <u>L9X 0P5</u>
I endorse <u>MIKE CAMPBELL</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
 Signature		<u>2026/04/25</u> Date (yyyy/mm/dd)	


Name of person providing endorsement – 5			
Last Name or Single Name <u>SPELLMAN</u>		Given Name(s) <u>CHRISTINE</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>65</u>	Street Name <u>RUGMAN CRES.</u>	
Municipality <u>SPRINGWATER</u>		Province <u>ON</u>	Postal Code <u>L9X 2A4</u>
I endorse <u>MIKE CAMPBELL</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
 Signature		<u>2026/04/25</u> Date (yyyy/mm/dd)	

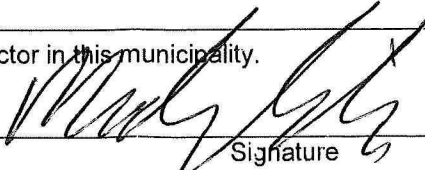
Name of person providing endorsement – 3			
Last Name or Single Name <u>Ganwood</u>		Given Name(s) <u>Matt</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>31</u>	Street Name <u>Rowley Cres</u>	
Municipality <u>Springwater</u>		Province <u>ON</u>	Postal Code <u>L0L1P0</u>
I endorse <u>Mike Campbell</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
 Signature		<u>2026/04/25</u> Date (yyyy/mm/dd)	

Name of person providing endorsement – 4			
Last Name or Single Name <u>BELCOURT</u>		Given Name(s) <u>RONALD</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>2010</u>	Street Name <u>NORTH ORR LAKE ROAD</u>	
Municipality <u>SPRINGWATER</u>		Province <u>ONTARIO</u>	Postal Code <u>L0L1P0</u>
I endorse <u>MIKE CAMPBELL</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
 Signature		<u>2026/04/25</u> Date (yyyy/mm/dd)	

Name of person providing endorsement – 5			
Last Name or Single Name <u>MCCLEAN</u>		Given Name(s) <u>DAN</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>19</u>	Street Name <u>SHAW ST.</u>	
Municipality <u>ELMVALE</u>		Province <u>ONT</u>	Postal Code <u>L0L1P0</u>
I endorse <u>MIKE CAMPBELL</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
 Signature		<u>2026/04/25</u> Date (yyyy/mm/dd)	

Name of person providing endorsement – 3			
Last Name or Single Name <u>Campbell</u>		Given Name(s) <u>Emma</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>3</u>	Street Name <u>Anthony Court</u>	
Municipality <u>Springwater</u>		Province <u>ON</u>	Postal Code <u>L9X 0T7</u>
I endorse <u>Mike Campbell</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
		<u>2026/04/26</u>	
Signature		Date (yyyy/mm/dd)	

Name of person providing endorsement – 4			
Last Name or Single Name <u>Coughlin</u>		Given Name(s) <u>Jennifer</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>1017</u>	Street Name <u>Coughlin Rd</u>	
Municipality <u>Springwater</u>		Province <u>ON</u>	Postal Code <u>L9X 1A9</u>
I endorse <u>Mike Campbell</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
		<u>2026/04/25</u>	
Signature		Date (yyyy/mm/dd)	

Name of person providing endorsement – 5			
Last Name or Single Name <u>COUGHLIN</u>		Given Name(s) <u>MARK</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>1017</u>	Street Name <u>COUGHLIN RD</u>	
Municipality <u>SPRINGWATER</u>		Province <u>ON</u>	Postal Code <u>L9X 1A9</u>
I endorse _____		as a candidate and declare that I am qualified to be an elector in this municipality.	
		<u>2026/04/25</u>	
Signature		Date (yyyy/mm/dd)	

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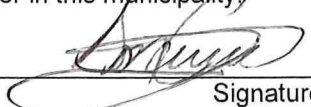
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Name of person seeking nomination

Last Name or Single Name	Given Name(s)
--------------------------	---------------

Endorsement signatures for the nomination of a person for an office in the municipality of _____
in the year _____.

Name of person providing endorsement			
Last Name or Single Name <i>Currie</i>		Given Name(s) <i>Glenn</i>	
Qualifying Address			
Suite/Unit Number	Street Number <i>1661</i>	Street Name <i>Old Second North</i>	
Municipality <i>Springwater</i>	Province	Postal Code	
I endorse <u><i>Mike Campbell</i></u> as a candidate and declare that I am qualified to be an elector in this municipality.			
Signature 		Date (yyyy/mm/dd) <i>2026 04/29</i>	

Name of person providing endorsement			
Last Name or Single Name <i>Curran</i>		Given Name(s) <i>Don</i>	
Qualifying Address			
Suite/Unit Number	Street Number <i>2406</i>	Street Name <i>Gill Rd.</i>	
Municipality <i>Udunwas</i>	Province <i>Ont.</i>	Postal Code <i>L9X 0L2</i>	
I endorse <u><i>Uma Campbell</i></u> as a candidate and declare that I am qualified to be an elector in this municipality.			
Signature 		Date (yyyy/mm/dd) <i>2026/05/04</i>	

Instructions

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Name of person seeking nomination

Last Name or Single Name	Given Name(s)
--------------------------	---------------

Endorsement signatures for the nomination of a person for an office in the municipality of _____ in the year _____.

Name of person providing endorsement – 1

Last Name or Single Name <u>Cochrane</u>		Given Name(s) <u>Shannon</u>	
Qualifying Address			
Suite/Unit Number <u>180</u>	Street Number	Street Name <u>Queen St. West</u>	
Municipality <u>Springwater</u>		Province <u>Ontario</u>	Postal Code <u>L0L 1P0</u>
I endorse <u>Mike Campbell</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
<u>A Cochrane</u> Signature		<u>2026/04/28</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>

Name of person providing endorsement – 2

Last Name or Single Name <u>Sweeney</u>		Given Name(s) <u>Nancy</u>	
Qualifying Address			
Suite/Unit Number	Street Number <u>5</u>	Street Name <u>Kent St</u>	
Municipality <u>Elmvale</u>		Province <u>ON</u>	Postal Code <u>L0L 1P0</u>
I endorse <u>Mike Campbell</u>		as a candidate and declare that I am qualified to be an elector in this municipality.	
<u>Nancy Sweeney</u> Signature		<u>2026/04/25</u> Date (yyyy/mm/dd)	<input type="button" value="Delete"/>