



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
Township of Springwater
Nominated for the Office of Councillor
Ward Name or Number (if any) Ward 1
Nominee's name as it is to appear on the ballot paper (subject to agreement of the municipal clerk)
Last Name or Single Name Garwood Given Name(s) Matt
Nominee's full qualifying address
Suite/Unit Number Street Number Street Name
31 Rowley Cres
Municipality Springwater Province Ontario Postal Code L0L 1P0
Mailing Address [X] Same as qualifying address
Suite/Unit Number Street Number Street Name
Municipality Province Postal Code
Email Address matt@electmattgarwood.ca Telephone Number 705-717-1707 Telephone Number 2

Declaration of Qualification

I, Matt Garwood, 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 (handwritten signature) Date (yyyy/mm/dd) 2026/04/30

Table with 4 columns: Date Received (2026/05/01), Time Received (9:03AM), Initial of Nominee or Agent (if filed in person), Signature of Clerk or Designate (handwritten 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)