

## **Ministry of Municipal Affairs**

## **Endorsement of Nomination - Form 2**

Municipal Elections Act, 1996 (Section 33)

## Instructions

- Complete additional forms as needed to obtain 25 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.

	seeking nomination										
Last Name or Sing		Given Name(s)									
Endorsement signatures for the nomination of a person for an office in the municipality of  in the year											
Name of person p	providing endorsem	nent									
Last Name or Sing	Given Name(s)										
Qualifying Address	<u> </u>										
Suite/Unit No.	Street No.	Street Name									
Municipality					Province		Postal Code				
I endorse			as a cand	idate and declare	that I am qualified	d to be an elec	tor in this municipality.				
							41.0				
Signature				Date (yyyy/mm/dd)							
[h. 6											
Name of person providing endorsement  Last Name or Single Name				Civan Nama(a)							
Last Name of Sing		Given Name(s)									
Qualifying Address											
Suite/Unit No.	Street No.	Street Name									
Municipality					Province		Postal Code				
I endorse			as a cand	idate and declare	that I am qualified	d to be an elec	tor in this municipality.				
		Signature		Date (yyyy/mm/dd)							
						())))	1				

## Instructions

- Complete additional forms as needed to obtain 25 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.

Name of person pro		nent		1				
Last Name or Single			Given Name(s)					
Qualifying Address								
Suite/Unit No.	Street No.	Street Name						
Municipality		<b> </b>			Province		Postal Code	
I endorse			as a cand	didate and declare	that I am qualified to	be an elect	tor in this municipality.	
		Signature		Date (yyyy/mm/dd)				
Name of person pro		nent						
Last Name or Single	Name			Given Name(s)				
Qualifying Address				•				
Suite/Unit No.	Street No.	Street Name						
Municipality					Province		Postal Code	
, ,								
I endorse			as a cand	as a candidate and declare that I am qualified to be an elector in this municipality.				
			_					
	Signature		Date (yyyy/mm/dd)					
				Bute (yyyymmad)				
Name of person pro	viding endorsen	nent						
Last Name or Single	Name			Given Name(s)				
Qualifying Address								
Suite/Unit No.	Street No.	Street Name						
Cancor Crime 1 to.	Curou No.	ou oot Hamo						
Municipality					Province		Postal Code	
wanticipality					1 TOVITICE		1 Ostal Code	
I endorse		as a cand	s a candidate and declare that I am qualified to be an elector in this municipality.					
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		0:				-1- / /	(-1-1)	
Signature					Date (yyyy/mm/dd)			

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