

## Nomination Paper – Form 1

Municipal Elections Act, 1996 (Sections 33, 35)

## 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).

or type information (except signatures).			
Nomination paper of a person to be a candidate at an elect	tion to be held in the following mu	ınicipality	
Lotrolia ON			
Nominated for the Office of	Ward Name or Number (if	Ward Name or Number (if any)	
<u>l'aincillor</u>			
Nominee's name as it is to appear on the ballot paper (sub	ject to agreement of the municipa	al clerk)	
Last Name or Single Name	Given Name(s)	Given Name(s)	
welsh	Sheila E	Sheila Elizabeth (Liz)	
Nominee's full qualifying address within municipality			
Suite/Unit Number   Street Number   Street Name			
1425 Quo	m St.		
Municipality	Province	Postal Code	
<u> </u>	$\sim$	I NON I ROZ	
Mailing Address Same as qualifying address			
Suite/Unit Number   Street Number   Street Name	,		
Municipality	Province	Postal Code	
		a Lucino	
If nominated for school board, full address of residence with	hin its jurisdiction		
Suite/Unit Number   Street Number   Street Name			
Municipality	Province	Postal Code	
Email Address	Telephone Number	Telephone Number 2	
Declaration of Qualification			
i ho work	. declare	that I am presently legally qualified	
TAL W CA			
(or would be presently legally qualified if I were not a member of Connected by the placeted and to hold the office of	· · · · · · · · · · · · · · · · · · ·	TUntario or the Senate or House of	
Commons of Canada) to be elected and to hold the office for	or which I am nominated.		
9000 106/21			
Signature of Nominee		Date (yyyy/mm/dd)	
		,	
Date Received (yyyy/mm/dd) Time Received In	itial of Nominee or Agent   Signa	ture of Clerk or Designate	
	filled in person	CAAD	
2022/06/2 10, 45	- fw. C	1	
Certification by Clerk or Designate	·		
I, the undersigned clerk of this municipality, do hereby certi	ify that I have examined the nom-	ination paper of the aforesaid	
nominee filed with me and am satisfied that the nominee is			
the Act.	The state of the s	and the month domption with	
Signature	Date Certified (yyyy/mm/dd)		
<del>-</del>		(3.3.3.7	