

Nomination Paper - Form 1

Municipal Elections Act, 1996 (Sections 33, 35)

A nomination paper may only be filed in person or by an agent; it may not be faxed or emailed. 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 candid	date at an	election to be hel	d in the following r	nunicipal	ity	
Nominated for the office of Ward name or no. (if any)							
Nominee's name as it	t is to appear on the ba	llot paper	(subject to agree				
Last Name or Single	Last Name or Single Name BURLEY Given Name(s) DWIGHT						
Nominee's full qualify	ing address within mur	icipality					
Suite/Unit No.	Street No. 3/9410	Street Na	by ho	od #1			
	RGIAN 1	340	FFS		Province	ONT	Postal Code NOHISO
Mailing Address Suite/Unit No.	Same as qua	Street Na					
Municipality					Province	9	Postal Code
If nominated for school	ol board, full address o	f residence	e within its jurisdi	ction			
Suite/Unit No.	Street No.	Street Na	ame				
Province Postal Code							
Email Address	Email Address Telephone No. (including area code) Telephone No.2 (including area code)						
Declaration of Qua						•	
I, DWIGHT BURLEY , 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.							
~ 0.00							
2022/05/04							
Signature of Nominee Date (yyyy/mm/dd)							
Date Filed (yyyy/mm/dd) Time Filed Initial of Nomine or Agent Signature of Clerk or Designate							
2022/05/04 3:38 p.m. DAD P							
Certification by CI	erk or Designate						<u> </u>
	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)							

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Ministry of Municipal Affairs and Housing

Endorsement of Nomination - Form 2

Municipal Elections Act, 1996 (Section 33)

Instructions

- · Candidates must obtain 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.

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Name of person seeking nomination				
Last Name or Single Name	Given Name(s)			
DURLEY	DWIGHT			
Endorsement signatures for the nomination of a person for an o	ffice in the municipality of			
GEORGIAN BLUFFS	in the year 2022			
Name of person providing endorsement – 1				
Last Name or Single Name	Given-Name(s) MCLEAN			
Qualifying Address				
Suite/Unit Number Street Number Street Name	RD 1			
Municipality GEORGIAN BLUFFS	Province Postal Code			
I endorse DWIGHT BURLEY	as a candidate and declare that I am qualified			
to be an elector in this municipality.	1			
Signature	May 3/2022 Date (yyyy/mm/dd)			
Olgriature	Date (yyyymmrad)			
Name of person providing endorsement – 2	lo: N			
Last Name or Single Name	Given Name(s)			
Qualifying Address	7			
Suite/Unit Number Street Number Street Name	Grosse 383 Som TRZ			
Municipality GEORGIAN BLUFFS	Province Postal Code			
I endorse DWIGHT BURLEY	as a candidate and declare that I am qualified			
to be an elector in this municipality.				
Redi Stæncos	2022/05/03 Date (yyyy/mm/dd)			
Signature	Date (yyyy/mm/dd)			

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- The qualifying address provided must include the postal code.

Name of person providing endorsement – 3	1.			
Last Name or Single Name	Given Name(s)			
RE ATTIE	BRUCE			
	1 / Cite C			
Qualifying Address				
Suite/Unit Number Street Number Street Name	1			
318601 6n 40	/			
Municipality GEORGIAN BLUFFS	Province Postal Code WYK 5NY			
lendorse DWIGHTBURKEY	as a candidate and declare that I am qualified			
to be an elector in this municipality.				
AN OWN	2029/05/03			
/ // Signature	Date (yyyy/mm/dd)			
	,			
Name of person providing endorsement – 4	Less and a second			
Last Name or Single Name	Given Name(s)			
JENINGS	MAUD			
Qualifying Address				
	0 11 /			
Suite/Unit Number Street Number Street Name Street Name	end Fl			
NA 1 1 19	Province Postal Code			
Municipality GEORGIAN BLUFFS	O NT			
I endorse DWIGHT BULLEY as a candidate and declare that I am qualified				
to be an elector in this municipality.				
	2 20/00/00			
hil and to remain	2022/05/03			
Signature	Date (yyyy/mm/dd)			
Name of the second seco				
Name of person providing endorsement – 5				
Last Name or Single Name	Given Name(s)			
MONK	CELESTE			
Qualifying Address				
Suite/Unit Number Street Number Street Name				
337 SomERS	ST.			
Municipality	Province Postal Code			
GEORGIAN BLUFFS	OM N4K 6V5			
I endorse DWIGHT BURKEY as a candidate and declare that I am qualified				
to be an elector in this municipality.				
Celester Into	2022/05/03			
Signature	Date (yyyy/mm/dd)			



Endorsement of Nomination - Form 2

Municipal Elections Act, 1996 (Section 33)

- Complete additional forms as needed to obtain 25 signatures.
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 municipality. An individual may sign an endorsement for more than one person seeking nomination.

Name of person seeking nomination	
Last Name or Single Name	Given Name(s)
KURLEY	Given Name(s) GHT
Endorsement signatures for the nomination of a person for an office	in the municipality of
GEORGIAN BLUFFS	in the year 202?
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
CIEMBA	Dans
Qualifying Address	
Suite/Unit No. Street No. Street Name	
319141 SREV	2000)
Municipality	Province Postal Code
GEMBAU ROUERS	WHX 052
1 1 2 1 2 0 101 6	10 10 00 2
as a call and orse DINIGHT BURKEY as a call	andidate and declare that I am qualified to be an elector in this municipality.
D'A ZM	Date (yyyy/mm/dd)
Signature	Date (vvvv/mm/dd)
·	24.0 ())))
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
Klemm	Andy
Qualifying Address	171.00
Suite/Unit No. Street No. Street Name \(\)	
319141 Phly K	1707 #1
Municipality () \	Province Postal Code
Slorgian Bluffs	Ont N4K002
10 1000 100	1141.00%
lendorse / MIGHT BURLEY as a ca	andidate and declare that I am qualified to be an elector in this municipality.
	and the same of th
	2022/05/02
Cignoture	Date (yyyy/mm/dd)
Signature	Date (yyyy/filifi/dd)

- · Complete additional forms as needed to obtain 25 signatures.
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Name of person providing endorsement	Levinor		
Last Name or Single Name	Given Name(s)		
ROBINSON	Michael		
Qualifying Address	/		
Suite/Unit No. Street No. Street Name Grey Radd	(# /		
Municipality Georgian Rluffs	Province Postal Code NO H IS 2		
I endorse DIMIGHT BURLEY as a cand	didate and declare that I am qualified to be an elector in this municipality.		
July Man	QOQQ/05/02 Date (yyyy/mm/dd)		
Signature	Date (yyyy/mm/dd)		
Name of person providing endorsement			
Last Name or Single Name	Given Name(s)		
Robinson	Nicole		
Qualifying Address	W. S.		
Suite/Unit No. Street No. Street Name	d#1		
Municipality Glagron Bluffs	Province Postal Code NO HISO		
I endorse DWIGHT BURLEY as a candidate and declare that I am qualified to be an elector in this municipality.			
Niel Robinsu	2022/05/02 Date (yyyy/mm/dd)		
Signature	Date (yyyy/mm/dd)		
Name of person providing endorsement			
Last Name or Single Name	Given Name(s)		
Berley	Kni e		
Qualifying Address	7,013		
Suite/Unit No. Street No. Street Name	1 11		
3/9410 /suy tro	ad #1		
Municipality GEORGIAN BLUFFS	Province Postal Code		
Tendorse 0 WIGHT BURKEY as a cand	didate and declare that I am qualified to be an elector in this municipality.		
Din Burlow	2022 05 05		
Signature	Date (yyyy/mm/dd)		



Ministry of Municipal Affairs and Housing

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Name of person seeking nomination	A T I I I I I I I I I I I I I I I I I I
Last Name or Single Name URLEY Give	en Name(s) NIGHT
Endorsement signatures for the nomination of a person for an office i	
GEORGIAN BLUFFS int	ne year 7022
Name of person providing endorsement – 1	
Last Name or Single Name	en Name(s)
Qualifying Address	
Suite/Unit Number Street Number Street Name 333	Revistion Rock
Municipality GEORGIAN BLUFFS Pro	vince ONT Postal Code
I endorse D NIGHT BURLEY 1	as a candidate and declare that I am qualified
to be an elector in this municipality.	
Signature	Date (yyyy/mm/dd)
digitature	Вако (уууулттаа)
Name of person providing endorsement – 2	
	en Name(s)
Ward	50nne
Qualifying Address	
Suite/Unit Number Street Number Street Name Park	Street
Municipality GEORGIAN BLUFFS Pro	vince Postal Code N4K6V5
Tendorse DWIGHT BURLEY	as a candidate and declare that I am qualified
to be an elector in this municipality.	1 1
Bonnie Ward	2022/05/03
Signature	Date (yyyy/mm/dd)

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Name of person providing end	orsement – 3			
Last Name or Single Name		Given Name(s)		
Word		* *	Jan	
Qualifying Address		L		
Suite/Unit Number Street Number	Street Name	- 1		
233	Pork	ST		
Municipality		Province		Postal Code
GEORGIAN		1 TOVINGS	ONT	NYK 6US
lendorse DWIGHT B	URLEY	1	as a candidate and declare	that I am qualified
to be an elector in this municipality.				
11/1			20221-10	
Signatur		_	2022/05/03 Date (yyyy/mm/dd)	
Signatu	are		Date (yyyy/mm/dd)	
Name of person providing end	orsement – 4	w.		ð
Last Name or Single Name	11	Given Name(s)	Debble	
\C	9		DEDGIC	
Qualifying Address				
Suite/Unit Number Street Number	Street Name	DENOIL	pann	
618	Street Name BALM4	DEH (M)	NUMD	
Municipality C C 0 C		Province		Postal Code
Municipality GEORGIAN	DLVIIS		IYI	MAY DWA
lendorse DWIGHT B		as a candidate and declare	that I am qualified	
to be an elector in this municipality.				
0 11 -	Paul	,	1012 05 02	
Deben t	109	~	022 05 03 Date (yyyy/mm/dd)	
Signatu	ire 0		Date (yyyy/mm/dd)	
Name of person providing ende	orsement – 5			
Last Name or Single Name		Given Name(s)		
Qualifying Address				
Suite/Unit Number Street Number	Street Name			
Municipality	0.1	Province	A . F	Postal Code
GEORGIAN	BLUFFS		ONT	The second secon
Tendorse DWIGHT BU	RLEY		as a candidate and declare	that I am qualified
to be an elector in this municipality.				
-				
Signatu	ire		Date (yyyy/mm/dd)	`

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<u></u>	
Name of person providing endorsement – 3	The state of the s
Last Name or Single Name	Given Name(s)
Miller	Christine
Qualifying Address	
Suite/Unit Number Street Number Street Name	
933 6	Province Postal Code
Municipality GEORGIAN BLUFFS	Province Postal Code N4k 063
Tendorse DWIGHT BURLEY	as a candidate and declare that I am qualified
to be an elector in this municipality.	
DD. 122 2 122.012	2022-25 03
Christine Miller Signature	
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement – 4	I.a.
Last Name or Single Name	Given Name(s) GEORGE
7	UILITY
Qualifying Address	14 -5 1
Suite/Unit Number Street Number Street Name 29	#151. W.
Municipality GEORGIAN BLUFFS	Province Postal Code 14K 360
Tendorse DWIGHT BURLEY	as a candidate and declare that I am qualified
to be an elector in this municipality.	. /
George Jintici	11/12/2/22
Signature	May 3/22 Date (yyyy/mm/dd)
Joignature	——————————————————————————————————————
Name of person providing endorsement – 5	N
Last Name or Single Name	Given Name(s)
WISEMAN	DARLENE
Qualifying Address	
Suite/Unit Number Street Number Street Name RANCE ROA	ID
Municipality GEORGIAN BLUFFS	Province Postal Code
I endorse D WIGHT BURLEY	as a candidate and declare that I am qualified
to be an elector in this municipality.	
hlashen Thi Em	may 3/22
Signature	Date (yyyy/mm/dd)



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Name of person seeking nomination				
Last Name or Single Name	Given Name(s) WIGHT			
Endorsement signatures for the nomination of a person for an or				
GEORGIAN BLUFFS	in the year 2022			
N				
Name of person providing endorsement – 1	Civon Nama(s)			
Last Name or Single Name	Given Name(s)			
Qualifying Address				
Suite/Unit Number Street Number Street Name Street N	CAO CAO			
Municipality GEORGIAN BLUFFS	Province Postal Code NY SNY			
Tendorse DWIGHT BURLEY	as a candidate and declare that I am qualified			
to be an elector in this municipality.				
Signature	Date (yyyy/mm/dd)			
Name of the same and the same of the same				
Name of person providing endorsement – 2	Civon Nama(a)			
Last Name or Single Name	Given Name(s)			
Qualifying Address				
Suite/Unit Number Street Number Street Name				
Municipality GEORGIAN BLUFFS	Province Postal Code			
I endorse D WIGHT B URLEY	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	Given Name(s) GHT
Endorsement signatures for the nomination of a person for an o	office in the municipality of
GEORGIAN BLUFFS	in the year 7 072
Name of person providing endorsement – 1	Ten and a second
Last Name or Single Name	Given Name(s)
Qualifying Address	
Suite/Unit Number Street Number Street Name	
Municipality GfoR GIAN BLUFFS	Province Postal Code
Tendorse DWIGHT BURLEY	as a candidate and declare that I am qualified
to be an elector in this municipality.	
Shyllist the	2022 05 63 Date (yyyy/mm/dd)
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement – 2	1
Last Name or Single Name	Given Name(s)
Qualifying Address	
Suite/Unit Number Street Number Street Name	
Municipality GEORGIAN BLUFFS	Province Postal Code
Tendorse DWIGHT BURLEY	as a candidate and declare that I am qualified
to be an elector in this municipality.	
	A Company of the Comp
Signature	Date (yyyy/mm/dd)

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Name of person providing endorsement – 3	
Last Name or Single Name	Given Name(s) Randy
Qualifying Address	·
Suite/Unit Number Street Number Street Name Cv4	4 Rd 17B
Municipality GEORGIAN BLUFFS	Province Postal Code NY C 6 V 5
Tendorse DWIGHT BURLEY	as a candidate and declare that I am qualified
to be an elector in this municipality. Signature	2022/05/03 Date (yyyy/mm/dd)
Name of person providing endorsement – 4 Last Name or Single Name	Given Name(s)
Qualifying Address Suite/Unit Number Street Number Street Name	5 3
Municipality GEORGIAN BLUFFS	Province Postal Code
Tendorse DWIGHT BURLEY	as a candidate and declare that I am qualified
to be an elector in this municipality.	
N .	
Signature	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 GEORGIAN BLUFFS I endorse DWIGHT BURLEY	Province Postal Code
to be an elector in this municipality.	as a candidate and declare that I am qualified
Signature	Date (yyyy/mm/dd)



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Municipal Elections Act, 1996 (Section 33)

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 municipality. An individual may sign an endorsement for more than one person seeking nomination.

	to the transfer of the transfe
Name of person seeking nomination	
Last Name or Single Name	Given Name(s)
BURKEY	NWIGHT
	The state of the s
Endorsement signatures for the nomination of a person for an office	e in the municipality of
GEORGIAN BLUFFS	in the year 2022
0 1201. 1.1	
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
COWELL	WINNIE THOMAS
Qualifying Address (8)0n as	WALTUR THOTOTIC
Suite/Unit No. Street No. Street Name	
Suite/Offictivo.	ITASII DOLLE
Marie III	Province Postal Code
Municipality	
GEORGIAN BLUFT-S	ON NOHISO
andorse WIGHT BURLEY as a	candidate and declare that I am qualified to be an elector in this municipality.
ds a	candidate and deciale that I am qualified to be an elector in this municipality.
/// Core / C	May 5/2012-
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement	The second second
Last Name or Single Name	Given Name(s)
ii	
Qualifying Address	ati = 1
Suite/Unit No. Street No. Street Name	
Municipality Communication of the state of t	Province Postal Code
GEORGIAN BLUFFS	O N I
Tendorse DWIGHT BURKEY as a	candidate and declare that I am qualified to be an elector in this municipality.
<u> </u>	**************************************
V VVVII 100	
	The state of the s
Signature	Date (yyyy/mm/dd)

- Complete additional forms as needed to obtain 25 signatures.
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 municipality. An individual may sign an endorsement for more than one person seeking nomination.

Name of person providing endorseme	ent	1-1-17-17		
Last Name or Single Name		Given Name(s)		
VINCENT		KATHY		
Qualifying Address				
Suite/Unit No. Street No.	Street Name			
150	MACINTOS	HAR		
Municipality	1-11-110100	TI DI	Province	Postal Code
0	0 0.00		to measure services.	
GEORGIAN,			ON	NOH 150
lendorse DWIGHT B	URLEY as a cand	didate and declare	that I am qualified to be an elec	ctor in this municipality.
1/	i.			
Kathy Vine	en		2023/05/03 Date (yyyy/m	\ni
	Signature		Ďate (yyyy/m	m/dd)
	woodyness are			t)
Name of person providing endorseme	ent			
Last Name or Single Name		Given Name(s)	CONTRACT NAMES OF THE PARTY OF	
HARRON		ROBERT	JAMES	
Qualifying Address		DAI	d El	
Suite/Unit No. Street No.	Street Name			
	HINDEN WOOD	ROAD.		
Municipality			Province	Postal Code
GEORGIAN E	BLUFFS		ONT.	NOHISO
Tendorse DWIGHT BUK	as a cand	didate and declare	that I am qualified to be an elec	ctor in this municipality.
0 1 . 01			2 2-1	1
Robert Havro	\sim		2022/05	102
	Signature		Date (yyyy/m	m/dd)
				~
×				
Name of person providing endorseme	ent			
Last Name or Single Name		Given Name(s)		1
Harron	Isabel	Jean		
Qualifying Address	20101	1 0201	•	
Suite/Unit No. Street No.	Street Name		1 0	
36368		envoor	d toad	
Municipality Horgion	Bluffs		Province wt	Postal Code NoH 153
I endorse DWIGHT BURKEY as a candidate and declare that I am qualified to be an elector in this municipality.				
Isabel Harr	im.		2022/6	5/02
_ Urunder 11000	Signature		Date (yyyy/m	



Endorsement of Nomination - Form 2

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Municipal Elections Act, 1996 (Section 33)

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Name of person seeking nomination Last Name or Single Name B VRLEY	Given Name(s) GHT
Endorsement signatures for the nomination of a person for an office i	in the municipality of in the year 2023 .
Name of person providing endorsement Last Name or Single Name U (L() W	Given Name(s)
Qualifying Address Suite/Unit No. Street No. Street Name	MGES STREET
Municipality GEORGIAN BLVFFS	Province ONT Postal Code W4K6V5
as a ca	andidate and declare that I am qualified to be an elector in this municipality. 2022/05/03 Date (yyyy/mm/dd)
Name of person providing endorsement Last Name or Single Name	Given Name(s)
Qualifying Address Suite/Unit No. Street No. Street Name SonGS	SMEET
Municipality GEORGIAN	Province Postal Code N4K GV
l'endorse 0 MIGHT BURLEY as a ca	andidate and declare that I am qualified to be an elector in this municipality.
Signature	2022/05/05 Date (yyyy/mm/dd)

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Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
70h 16h	THUL
Qualifying Address	1 0 1 - 0
	\sim 1
Suite/Unit No. Street No. Street Name	eall all a st
285	SOMER'S ST
	Province Postal Code
GEORGIAN BLUFFS	ONT N4KGUS
Tendorse DWIGHT BURLEY as a can	didate and declare that I am qualified to be an elector in this municipality.
La Vigo Ta	2022/05/03
- Jon Coll	
Signature	Date (yyyy/mm/dd)
To a sure	
Name of person providing endorsement	W.
Last Name or Single Name	Given Name(s)
BURKOWS	ICEUIN
Qualifying Address	
Suite/Unit No. Street No. Street Name	
	13 TH ST W
807	(1)
Municipality GEORGIAN BLUFFS	Province Postal Code
Day CHE D. P. C.	didate and declare that I am qualified to be an elector in this municipality.
A. 13	
The Dune	2 022 / 05 / 03 Date (yyyy/mm/dd)
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
anax	Tools
219000	20/11
Qualifying Address	
Suite/Unit No. Street No. Street Name	St w. PHERMANN.
Municipality C C A C A C A C A C A C A C A C A C A	Province Postal Code
GEORGIAN BLUFFS	ONT
I endorse DWIGHT BURLEY as a cand	didate and declare that I am qualified to be an elector in this municipality.
1 dressouls	2012105/03



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 municipality. An individual may sign an endorsement for more than one person seeking nomination.

Name of person seeking nomination
Last Name or Single Name Compared to the co
DWIGHT BURLEY
Endergovers already use for the nemination of a person for an office in the municipality of
Endorsement signatures for the nomination of a person for an office in the municipality of
GEORGIAN BLUFFS in the year 2023.
Name of person providing endorsement
Last Name or Single Name
STEPHEN BISHOP
Qualifying Address
Suite/Unit No. Street No. Street Name 7 1 8 0 0
Suite/Unit No. Street No. Street Name CREY Rd I 318889
Municipality Province Postal Code
GEODAIAN BLUFFY
as a candidate and declare that I am qualified to be an elector in this municipal
as a candidate and declare that I am qualified to be an elector in this municipal
Rt 1 0 1 2 2022
Stephen H Bishop My 2 2022. Signature Date (yyyy/mm/dd)
Date (yyyy/mm/dd)
Name of person providing endorsement
Last Name or Single Name Given Name(s)
TERRI GODIN
Qualifying Address
Suite/Unit No. Street No. Street Name
Municipality 319065 CoNo ROAD # Province Postal Code
GBONGIAN BUFFS 104KOB
I endorse DWIGHT BURLY as a candidate and declare that I am qualified to be an elector in this municipal
2022/05/02
Signature Date (yýyy/mm/dd)

- · 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 providing endorsement		
Last Name or Single Name	Given Name(s)	
Qualifying Address		
Suite/Unit No. Street No. Street Name	56 GREYRO.	
Municipality Glorgian Bloffs	Province	Postal Code
lendorse DWIGHT BARLEY as a ca	ndidate and declare that I am qualified to be an elec	ctor in this municipality.
Ilmolen Jouluss	2522/c Date (yyyy/mi	05/02 m/dd)
No. 25 Company and the company of		
Name of person providing endorsement Last Name or Single Name	Given Name(s)	
Last Name of Single Name	Given Name(s)	
Qualifying Address	1/ 2	7).
Suite/Unit No. Street No. Street Name 319	156 Duy RDHI	
Municipality Glargeon Bluffs	Province C ~~	Postal Code
I endorse DWIGHT BURLE, as a ca	ndidate and declare that I am qualified to be an elec	,
Beverley Imlenson	2022/0	15/02
Signature	Date (yyyy/mi	m/dd)
Name of person providing endorsement	1	9.5
Last Name or Single Name	Given Name(s)	
Qualifying Address	· ·	OC.
Suite/Unit No. Street No. Street Name		
Municipality	Province	Postal Code
I endorse as a ca	l ndidate and declare that I am qualified to be an elec	etor in this municipality.
Signature	Date (yyyy/mi	m/dd)



Endorsement of Nomination - Form 2

Municipal Elections Act, 1996 (Section 33)

- · 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 seeking nomination	
Last Name or Single Name DWIGHT	Given Name(s) DWIGHT
Endorsement signatures for the nomination of a person for an office in	
GEORGIAN BLUFFS	in the year 2027
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
Burley	HUPREY
Qualifying Address	04 0
Suite/Unit No. Street No. Street Name 3 194	10 Drey Road #1
Municipality Blorgian Bluffs	Province Postal Code NO H IS o
ndorse DINIGHT BURLEY as a can	didate and declare that I am qualified to be an elector in this municipality.
Burly Signature	Date (yyyy/mm/dd)
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
Shutak	PATRICIA
Qualifying Address	
Suite/Unit No. Street No. Street Name	Intosh DRIVE
Municipality GEORGIAN BL	VFFS Province Postal Code NOH ISO
I endorse DWIGHT BURLEY as a can	didate and declare that I am qualified to be an elector in this municipality.
P. Dhutak Signature	# 2022/04/82 Date (yyyy/mm/dd)

- · 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 providing	g endorsement	<u> </u>	1		
Last Name or Single Name	57	1	Given Name(s)	11,50	
BURLE	1		DINIG	17	
Qualifying Address			The second secon		
1	et No.	Street Name			
7	54	WI			
Municipality		AV		Province	Postal Code
/					uf. Transass sausasses
I endorse		as a cand	lidate and declare	that I am qualified to be an elec	tor in this municipality.
6		0			
-	Sig	gnature		Date (yyyy/mr	n/dd)
			**	AND DEC	
Name of person providing			• 22 22 23		
Last Name or Single Name	Ř.	H =	Given Name(s)		
	11	n. 17a.			
Qualifying Address		I			
Suite/Unit No. Stree	et No.	Street Name		e e	
13.79 193		· ·			
Municipality	00.00	01,156		Province	Postal Code
GEO	RUIAN	SAUFIS		ONI	(
Landara N. III (C.)	1- 12 11	BLEY as a cand	The second secon	The second secon	
l endorse DWIG	INGI TH	as a cand	lidate and declare	that I am qualified to be an elec	tor in this municipality.
	Sig	gnature		Date (yyyy/mr	n/dd)
Acres 1		All chief and a second			
N					
Name of person providing			Louis Nama(a)		
Last Name or Single Name	*		Given Name(s)		
TORK SAME THE THE THE THE THE THE THE THE THE TH					
Qualifying Address	a a g	T 2 86		8	
Suite/Unit No. Stree	et No.	Street Name			
			1-1		
Municipality	· DC=100	V BLUFFS		Province	Postal Code
UTF	OKUIT	BYALLS		UNI	
I endorse D NIG	ORGIAN	la Gu	lidate and declare	that I am qualified to be an elec-	tor in this municipality
Telidolog UNIT	HI MOI	as a canu	lldate and deciare	that I am qualified to be an elec	tor in this municipality.
	5_9				
	Sig	gnature		Date (yyyy/mr	n/dd)



Endorsement of Nomination - Form 2

Municipal Elections Act, 1996 (Section 33)

- · Complete additional forms as needed to obtain 25 signatures.
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2	
Name of person seeking nomination	
BURLEY Given Name(s) BURLEY	7 La 41 - 7 - 2
Endorsement signatures for the nomination of a person for an office in the municipality of	
$\alpha = 0$	D 27
O LO TIGITITY IS NOT 13	053
Name of person providing endorsement	
Last Name or Single Name Given Name(s)	\sim
GODIN DINNNE	<u>) </u>
Qualifying Address	
Suite/Unit No. Street No. Street Name 319065 GREY RD	1
Municipality GEORGIAN BLUFFS Province	Postal Code NHKO6-2
ndorse DWIGHT BURLEY as a candidate and declare that I am qualifie	ed to be an elector in this municipality.
Bichne Golin Signature	022 05 02 Date (yyyy/mm/dd)
Oignature	Date (yyyymmiad)
Name of person providing endorsement	
Last Name or Single Name Given Name(s)	
Qualifying Address	
Suite/Unit No. Street No. Street Name	
Municipality GEORGIAN BLUFFS Province	NT Postal Code
I endorse as a candidate and declare that I am qualifie	ed to be an elector in this municipality.
Signature	Date (yyyy/mm/dd)

- · 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-	viding endorsement				
ast Name or Single Name Given Name(s)					
Qualifying Address	Ī				
Suite/Unit No.	Street No.	Street Name			
M. minimalika				Province	Postal Code
	EORGIAN			O NT	Postal Code
I endorse D W	IGHT BU	RLEY as a cand	didate and declare	that I am qualified to be an elec	tor in this municipality.
1	Się	gnature		Date (yyyy/mi	n/dd)
Name of person prov	viding endorsement				ii ii
Last Name or Single N	Name		Given Name(s)		
Qualifying Address		ı			
Suite/Unit No.	Street No.	Street Name			
M				Drovingo	Postal Code
Municipality G	EORGIAN	BLUFFS		Province OWT	Postal Code
I endorse D \	LIGHT BUR	AEY as a cand	didate and declare	that I am qualified to be an elec	tor in this municipality.
		a a			
-	Sic	gnature	7.7	Date (yyyy/mr	m/dd)
Name of person prov Last Name or Single N	0.770		Given Name(s)		
Last Name of Ongle i	vanic		Given Hame(s)		
Qualifying Address		20			
Suite/Unit No.	Street No.	Street Name			0.15
Municipality		01.0-	3	Province	Postal Code
GI	LORGIA1	V BLUFFS		ONI	Uh." = I
I endorse 0 W I	GHT BURL	Ey as a cand	didate and declare	that I am qualified to be an elec	tor in this municipality.
	*1				
-	C:	gnature	<u> </u>	Date (yyyy/mr	m/dd)
	310	griature		Date (yyyy/iii	ii/dd)