

**Instructions**

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 candidate at an election to be held in the following municipality			
Georgian Bluffs			
Nominated for the office of Councillor		Ward name or no. (if any)	
Nominee's name as it is to appear on the ballot paper (subject to agreement of the municipal clerk)			
Last Name or Single Name Moore Coburn		Given Name(s) Cathy	
Nominee's full qualifying address within municipality			
Suite/Unit No.	Street No. 620	Street Name 2nd Ave. SE	
Municipality Georgian Bluffs		Province ON	Postal Code N4K5T1
Mailing Address <input checked="" type="checkbox"/> Same as qualifying address			
Suite/Unit No.	Street No.	Street Name	
Municipality		Province	Postal Code
If nominated for school board, full address of residence within its jurisdiction			
Suite/Unit No.	Street No.	Street Name	
Municipality		Province	Postal Code
Email Address rc.coburn@outlook.com		Telephone No. (including area code) 519-376-3569	Telephone No.2 (including area code)


**Declaration of Qualification**

I, Cathy Moore Coburn, 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.

Cathy Moore Coburn  
Signature of Nominee

2022/06/01

Date (yyyy/mm/dd)

Date Filed (yyyy/mm/dd) 2022/06/02	Time Filed 1:00 p.m.	Initial of Nominee or Agent CMC	Signature of Clerk or Designate 
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**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)

**Instructions**

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- 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

MOORE COBURN

Given Name(s)

CATHY

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

GEORGIAN BLUFFS

in the year

2022

**Name of person providing endorsement**

Last Name or Single Name

SCHNEIDER

Given Name(s)

CLARK

Qualifying Address

Suite/Unit No.

Street No.

464280

Street Name

CONCESSION 24

Municipality

GEORGIAN BLUFFS

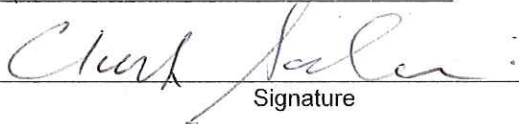
Province

ON

Postal Code

N0H 2T0

 I endorse CATHY MOORE COBURN as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

 2022/May/19  
 Date (yyyy/mm/dd)

**Name of person providing endorsement**

Last Name or Single Name

McLuhan

Given Name(s)

MICHAEL

Qualifying Address

Suite/Unit No.

Street No.

310479

Street Name

KEMBLE ROCK RD

Municipality

GEORGIAN BLUFFS

Province

ONT

Postal Code

N0H 2T0

 I endorse CATHY MOORE COBURN as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

 2022-05-19  
 Date (yyyy/mm/dd)

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<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>Zandvliet</u>		Given Name(s) <u>Joel</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>503125</u>	Street Name <u>Grey Road 1</u>	
Municipality <u>Georgian Bluffs</u>		Province <u>Ontario</u>	Postal Code <u>N0H 2T0</u>
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
_____ <u>[Signature]</u> Signature		_____ <u>2022/05/19</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>Little</u>		Given Name(s) <u>Emily Jane</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>503125</u>	Street Name <u>Grey Road 1</u>	
Municipality <u>Georgian Bluffs</u>		Province <u>Ontario</u>	Postal Code <u>N0H 2T0</u>
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
_____ <u>[Signature]</u> Signature		_____ <u>2022/05/19</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>Kupers</u>		Given Name(s) <u>Natalie</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>139144</u>	Street Name <u>Hindman Sideroad</u>	
Municipality <u>Georgian Bluffs</u>		Province <u>Ontario</u>	Postal Code <u>N0H 2K0</u>
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
_____ <u>[Signature]</u> Signature		_____ <u>2022/05/22</u> Date (yyyy/mm/dd)	

Save Form

Print Form

Clear Form

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**Name of person seeking nomination**

Last Name or Single Name

MOORE COBURN

Given Name(s)

CATHY

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

GEORGIAN BLUFFS

in the year 2022

**Name of person providing endorsement**

Last Name or Single Name

SCHNEIDER

Given Name(s)

ANN

Qualifying Address

Suite/Unit No.

Street No.

Street Name

464280

CONCESSION

24

Municipality

GEORGIAN BLUFFS

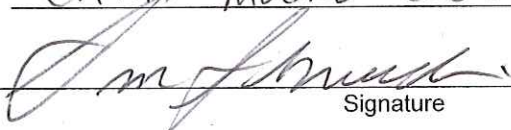
Province

ON

Postal Code

N0H 2T0

 I endorse CATHY MOORE COBURN as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

 MAY 19 / 2022  
 Date (yyyy/mm/dd)

**Name of person providing endorsement**

Last Name or Single Name

CAVAN

Given Name(s)

Patricia Cavan

Qualifying Address

Suite/Unit No.

Street No.

Street Name

502766

Gray Rd. 1

Municipality

Georgian Bluffs

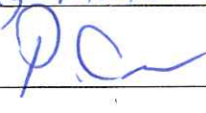
Province

ON

Postal Code

N0H 2T0

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

 May 19 / 20  
 Date (yyyy/mm/dd)

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<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>VALLEAU</u>		Given Name(s) <u>DANUTA</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>310479</u>	Street Name <u>KEMBLE ROCK RD.</u>	
Municipality <u>GEORGIAN BLUFFS</u>		Province <u>ONTARIO</u>	Postal Code <u>N0H 2T0</u>
I endorse <u>CATHY MOORE COBURN</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>D Valleau</u> Signature		<u>2022/05/19</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>GRAY</u>		Given Name(s) <u>ROBERT</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>310132</u>	Street Name <u>Kemble Rock Rd.</u>	
Municipality <u>Georgian Bluffs</u>		Province <u>Ontario</u>	Postal Code <u>N0H 1S0</u>
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>Robert Gray</u> Signature		<u>2022/05/20</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>GRAY</u>		Given Name(s) <u>Mary Elizabeth</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>310132</u>	Street Name <u>Kemble Rock Road</u>	
Municipality <u>Georgian Bluffs</u>		Province <u>Ontario</u>	Postal Code <u>N0H 1S0</u>
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>Mary E. Gray</u> Signature		<u>2022/05/20</u> Date (yyyy/mm/dd)	

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<b>Name of person providing endorsement</b>			
Last Name or Single Name <i>Brispers</i>		Given Name(s) <i>Kevin</i>	
Qualifying Address			
Suite/Unit No.	Street No. <i>139144</i>	Street Name <i>Hindman Sideroad</i>	
Municipality <i>Georgian Bluffs</i>		Province <i>ON</i>	Postal Code <i>N6H 2K5</i>
I endorse <u><i>Cathy Moore Coburn</i></u> as a candidate and declare that I am qualified to be an elector in this municipality.			
_____ Signature		_____ Date (yyyy/mm/dd) <i>May 23 2022</i>	

<b>Name of person providing endorsement</b>			
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 candidate and declare that I am qualified to be an elector in this municipality.			
_____ Signature		_____ Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
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 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

Moore Coburn

Given Name(s)

Cathy

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

Georgian Bluffs

in the year 2022

**Name of person providing endorsement**

Last Name or Single Name

Brown

Given Name(s)

Robert Allen

Qualifying Address

Suite/Unit No.

504679

Street No.

Street Name

Gray Road 1

Municipality

Georgian Bluffs

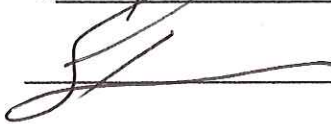
Province

ONT

Postal Code

N0H1S0

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

2022 05 21

Date (yyyy/mm/dd)

**Name of person providing endorsement**

Last Name or Single Name

SIMPSON

Given Name(s)

CLAIRE MARIE

Qualifying Address

Suite/Unit No.

Street No.

505095

Street Name

GREY RD 1

Municipality

KEMBLE (Georgian Bluffs)

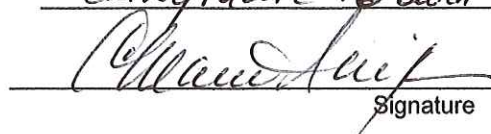
Province

ON

Postal Code

N0H1S0

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.



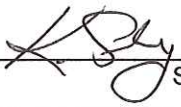
Signature

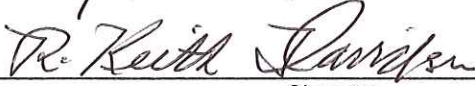
May 21 2022

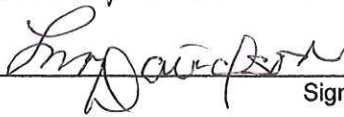
Date (yyyy/mm/dd)

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<b>Name of person providing endorsement</b>			
Last Name or Single Name SLY		Given Name(s) KENNETH	
Qualifying Address			
Suite/Unit No.	Street No. 505095	Street Name Grey Road 1	
Municipality Kemble (Georgian Bluffs)		Province ON	Postal Code N0H 1S0
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
 Signature		<u>2022/05/22</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name (R. KEITH) DAVIDSON		Given Name(s) ROBERT KEITH	
Qualifying Address			
Suite/Unit No.	Street No. 505129	Street Name GREY RD I	
Municipality R.R. KEMBLE		Province ON	Postal Code N0H 1S0
I endorse <u>CATHY MOORE COBURN</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
 Signature		<u>2022/05/22</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name DAVIDSON		Given Name(s) LOLA MARIE	
Qualifying Address			
Suite/Unit No.	Street No. 505129	Street Name GREY ROAD 1	
Municipality RR# KEMBLE (Georgian Bluffs)		Province ONT.	Postal Code N0H-1S0
I endorse <u>CATHY MOORE COBURN</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
 Signature		<u>2022/05/22</u> Date (yyyy/mm/dd)	

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**Instructions**

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**Name of person seeking nomination**

Last Name or Single Name

Moore Coburn

Given Name(s)

Cathy

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

Georgian Bluffs

in the year 2022

**Name of person providing endorsement**

Last Name or Single Name

WILSON

Given Name(s)

PAMELA JOAN

Qualifying Address

Suite/Unit No.

Street No.

Street Name

504877

GREY ROAD 1

Municipality

GEORGIAN BLUFFS

Province

ONTARIO

Postal Code

N0H 1S0

 I endorse CATHY MOORE COBURN as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

2022/05/17  
 Date (yyyy/mm/dd)

**Name of person providing endorsement**

Last Name or Single Name

WILSON

Given Name(s)

WILLIAM EDWIN

Qualifying Address

Suite/Unit No.

Street No.

Street Name

504877

GREY ROAD 1

Municipality

GEORGIAN BLUFFS

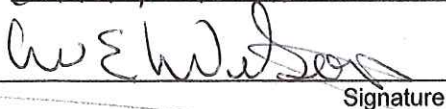
Province

ONTARIO

Postal Code

N0H 1S0

 I endorse CATHY MOORE COBURN as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

2022/05/17  
 Date (yyyy/mm/dd)

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<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>MORRIS</u>		Given Name(s) <u>CONNIE</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>505616</u>	Street Name <u>Grey Rd 1</u>	
Municipality <u>Kemble (Georgian Bluffs)</u>	Province <u>ON</u>	Postal Code <u>N0H 1S0</u>	
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
Signature <u>Connie Morris</u>		Date (yyyy/mm/dd) <u>May 20, 2022</u>	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>THOMPSON</u>		Given Name(s) <u>KOBINA</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>109</u>	Street Name <u>SPENCER ST</u>	
Municipality <u>GEORGIAN BLUFFS</u>	Province <u>ONT</u>	Postal Code <u>N0N 2T0</u>	
I endorse <u>CATHY MOORE COBURN</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
Signature <u>[Signature]</u>		Date (yyyy/mm/dd) <u>2022/05/20</u>	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>Grant</u>		Given Name(s) <u>Sherry</u>	
Qualifying Address			
Suite/Unit No.	Street No.	Street Name <u>504679 Grey Rd #1</u>	
Municipality <u>Georgian Bluffs</u>	Province <u>On</u>	Postal Code <u>N0H 1S0</u>	
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
Signature <u>Sherry Grant</u>		Date (yyyy/mm/dd) <u>2022/05/21</u>	

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**Name of person seeking nomination**

Last Name or Single Name

Moore Coburn

Given Name(s)

Cathy

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

Georgian Bluffs

in the year 2022.

**Name of person providing endorsement**

Last Name or Single Name

Harwood

Given Name(s)

Mark Robert

Qualifying Address

Suite/Unit No.

Street No.

Street Name

482472

Colpoy's Range Road

Municipality

Georgian Bluffs

Province

Ont

Postal Code

N0H 2T0

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.

Signature

2022/05/18

Date (yyyy/mm/dd)

**Name of person providing endorsement**

Last Name or Single Name

COONEY

Given Name(s)

JOANN

Qualifying Address

Suite/Unit No.

Street No.

Street Name

120

HAVELOCK ST

Municipality

GEORGIAN BLUFFS

Province

ON

Postal Code

N0H 2T0

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.

Signature

2022/05/18

Date (yyyy/mm/dd)

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<b>Name of person providing endorsement</b>			
Last Name or Single Name GRIFFITHS		Given Name(s) ROBERTA	
Qualifying Address			
Suite/Unit No.	Street No. 482475	Street Name COLPOYS RANGE RD	
Municipality GEORGIAN BLUFFS	Province ONT	Postal Code N0H 2T0	
I endorse <u>CATHY MOORE COBURN</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
_____ Roberta Griffiths Signature		_____ 2022/05/18 Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name MATTHEWS		Given Name(s) CLARE	
Qualifying Address			
Suite/Unit No.	Street No. 462581	Street Name Conc 24	
Municipality Georgian Bluffs	Province ON	Postal Code N0H 2T0	
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
_____ Clare Matthews Signature		_____ 2022/05/18 Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name Gammie		Given Name(s) Katherine	
Qualifying Address			
Suite/Unit No.	Street No. 462637	Street Name Concession 24	
Municipality Georgian Bluffs	Province ON	Postal Code N0H 2T0	
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
_____ Katherine Gammie Signature		_____ 2022/05/18 Date (yyyy/mm/dd)	

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<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>KUREK</u>		Given Name(s) <u>VALERIE GRACE</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>482472</u>	Street Name <u>Colpoy's Range Rd</u>	
Municipality <u>Georgian Bluffs</u>	Province <u>ONTARIO</u>	Postal Code <u>N0H 2T0</u>	
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>Valerie Kurek</u> Signature		<u>2022/05/17</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>KER</u>		Given Name(s) <u>BEVERLY</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>130463</u>	Street Name <u>GLEASON LAKE RD</u>	
Municipality <u>GEORGIAN BLUFFS</u>	Province <u>ON</u>	Postal Code <u>N0H 2T0</u>	
I endorse <u>CATHY MOORE COBURN</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>B Ker</u> Signature		<u>2022/05/18</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>PIXON</u>		Given Name(s) <u>Timothy Hugh</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>130466</u>	Street Name <u>Gleason Lake Rd</u>	
Municipality <u>Georgian Bluffs</u>	Province <u>ON</u>	Postal Code <u>N0H 2T0</u>	
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>T H Dixon</u> Signature		<u>2022/05/19</u> Date (yyyy/mm/dd)	

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**Name of person seeking nomination**

Last Name or Single Name Moore Coburn	Given Name(s) Cathy
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 Endorsement signatures for the nomination of a person for an office in the municipality of  
 Georgian Bluffs in the year 2022

**Name of person providing endorsement**

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

Qualifying Address		
Suite/Unit No. —	Street No. 620	Street Name 2nd Ave SE

Municipality Georgian Bluffs	Province ON	Postal Code N4K 5T1
---------------------------------	----------------	------------------------

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.

<u>Rob Coburn</u> Signature	<u>2022/05/20</u> Date (yyyy/mm/dd)
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**Name of person providing endorsement**

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

Qualifying Address		
Suite/Unit No.	Street No.	Street Name

Municipality	Province	Postal Code
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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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**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 seeking nomination**

Last Name or Single Name

MOORE COBURN

Given Name(s)

CATHY

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

GEORGIAN BLUFFS

in the year 2022

**Name of person providing endorsement**

Last Name or Single Name

STITT

Given Name(s)

CLAIRE

Qualifying Address

Suite/Unit No.

Street No.

Street Name

178

~~178~~ SUTACRITI

Municipality

GEORGIAN BLUFFS

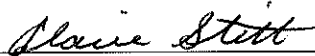
Province

ON.

Postal Code

N0H1S0

 I endorse CATHY MOORE COBURN as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

2022/05/28

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

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)

**Instructions**

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**Name of person seeking nomination**

Last Name or Single Name	CATHY	Given Name(s)	MOORE COBURN
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Endorsement signatures for the nomination of a person for an office in the municipality of

GEORGIAN BLUFFS in the year 2022

**Name of person providing endorsement**


Last Name or Single Name	DAVIDSON	Given Name(s)	Monte Jean
--------------------------	----------	---------------	------------

**Qualifying Address**

Suite/Unit No.	Street No.	Street Name	RR #3	Owen Sound
	137265	Con 7		

Municipality	Georgian Bluffs	Province	Ontario	Postal Code	N4K 5N5
--------------	-----------------	----------	---------	-------------	---------

 I endorse CATHY MOORE COBURN as a candidate and declare that I am qualified to be an elector in this municipality.

  
 Signature

2022/05/20  
 Date (yyyy/mm/dd)

**Name of person providing endorsement**

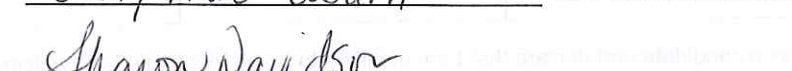
Last Name or Single Name	DAVIDSON	Given Name(s)	SHARON Denise
--------------------------	----------	---------------	---------------

**Qualifying Address**

Suite/Unit No.	Street No.	Street Name	RR3	Owen Sound
	137265	Con 7		

Municipality	Georgian Bluffs	Province	ON	Postal Code	N4K 5N5
--------------	-----------------	----------	----	-------------	---------

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.

  
 Signature

2022 05 20  
 Date (yyyy/mm/dd)





**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 seeking nomination**

Last Name or Single Name <b>Moore Coburn</b>	Given Name(s) <b>Cathy</b>
---	-------------------------------

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

**Georgian Bluffs** in the year **2022**
**Name of person providing endorsement**

Last Name or Single Name <b>Erb</b>	Given Name(s) <b>Zachary</b>
--	---------------------------------

## Qualifying Address

Suite/Unit No.	Street No.	Street Name
	<b>252</b>	<b>Finden Street</b>

Municipality <b>Georgian Bluffs</b>	Province <b>ON</b>	Postal Code <b>N4K 0G3</b>
--	-----------------------	-------------------------------

 I endorse **Cathy Moore Coburn** as a candidate and declare that I am qualified to be an elector in this municipality.

	<b>2022/05/30</b>
Signature	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

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)

**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 seeking nomination**

Last Name or Single Name

MOORE COBURN

Given Name(s)

CATHY

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

Georgian Bluffs

in the year 2022

**Name of person providing endorsement**

Last Name or Single Name

MCKINLAY, MILLA ELIZABETH

Given Name(s)

Milla Elizabeth

Qualifying Address

Suite/Unit No.

Street No.

Street Name

109

 MAPLE RIDGE Road (Owen Sound) <sup>mailing address</sup>

Municipality

Georgian BLUFFS

Province

ONTARIO

Postal Code

N4K-5N4

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.

M. Elizabeth McKinlay  
Signature

2022/05/30  
Date (yyyy/mm/dd)

**Name of person providing endorsement**

Last Name or Single Name

MORRIS

Given Name(s)

DAVID THOMAS

Qualifying Address

Suite/Unit No.

Street No.

Street Name

109

 Maple Ridge Road (Owen Sound) <sup>mailing address</sup>

Municipality

Georgian Bluffs

Province

Ontario

Postal Code

N4K 5N4

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.

David Thomas  
Signature

2022/05/30  
Date (yyyy/mm/dd)

**Instructions**

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**Name of person seeking nomination**

Last Name or Single Name

Moore Coburn

Given Name(s)

Cathy

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

Georgian Bluffs.

in the year 2022.

**Name of person providing endorsement**

Last Name or Single Name

van Dijk

Given Name(s)

Anton

Qualifying Address

Suite/Unit No.

Street No.

Street Name

381

Aiken St. - RR#7

Municipality

Georgian Bluffs

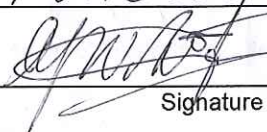
Province

ON

Postal Code

N4K6V5

 I endorse Cathy Moore Coburn as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

2022/05/21

Date (yyyy/mm/dd)

**Name of person providing endorsement**

Last Name or Single Name

van Dijk

Given Name(s)

RIEJANNE

Qualifying Address

Suite/Unit No.

Street No.

Street Name

381

AIKEN St. RR#7

Municipality

GEORGAN BLUFFS

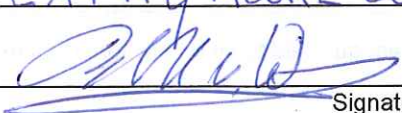
Province

Ont.

Postal Code

N4K6V5

 I endorse CATHY MOORE COBURN as a candidate and declare that I am qualified to be an elector in this municipality.



Signature

2022/05/22

Date (yyyy/mm/dd)

**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.

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>Mortimer</u>		Given Name(s) <u>Christine</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>105</u>	Street Name <u>Indira Ave</u>	
Municipality <u>Georgian Bluffs</u>		Province <u>ON</u>	Postal Code <u>N0H 1S0</u>
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>C. Mortimer</u> Signature		<u>2022 05 25</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>Ross</u>		Given Name(s) <u>Suzanne</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>339592</u>	Street Name <u>Brasquie Road</u>	
Municipality <u>Georgian Bluffs</u>		Province <u>Ontario</u>	Postal Code <u>N0H 1S0</u>
I endorse <u>Cathy Moore Coburn</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>Suzanne Ross</u> Signature		<u>2022/05/25</u> Date (yyyy/mm/dd)	

<b>Name of person providing endorsement</b>			
Last Name or Single Name <u>STITT</u>		Given Name(s) <u>JAMES</u>	
Qualifying Address			
Suite/Unit No.	Street No. <u>178</u>	Street Name <u>50 TACRITI ST.</u>	
Municipality <u>GEORGIAN BLUFFS</u>		Province <u>Ont.</u>	Postal Code <u>N10H 1S0</u>
I endorse <u>CATHY MOORE COLBURNE</u> as a candidate and declare that I am qualified to be an elector in this municipality.			
<u>J. Stitt</u> Signature		<u>MAY 27, 2022</u> Date (yyyy/mm/dd)	

Save Form

Print Form

Clear Form