

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). Nomination paper of a person to be a candidate at an election to be held in the following municipality Municipality of Georgian Bluffs Nominated for the Office of Ward Name or Number (if any) Mayor Nominee's name as it is to appear on the ballot paper (subject to agreement of the municipal clerk) Given Name(s) Last Name or Single Name Scott William Catto Nominee's full qualifying address within municipality Suite/Unit Number | Street Number Street Name 122414 **Grey County Road 5 Province** Postal Code Municipality N4K 5N5 Georgian Bluffs On. Same as qualifying address Mailing Address Suite/Unit Number | Street Number Street Name **Postal Code** Province Municipality If nominated for school board, full address of residence within its jurisdiction Suite/Unit Number | Street Number Street Name Postal Code Province Municipality Telephone Number 2 Telephone Number Email Address 226-568-3677 scottcatto2.0@gmail.com **Declaration of Qualification** , declare that I am presently legally qualified I, Scott William Catto (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. 2022/08/17 Date (yyyy/mm/dd) Signature of Nominee Date Received (yyyy/mm/dd) Time Received Initial of Nominee or Agent Signature of Clerk or Designate (if filed in person) 2:25 p.m. 2022/08/18 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. Date Certified (yyyy/mm/dd) Signature

- 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)
Cauchshand
Qualifying Address
Suite/Unit No. Street No. Street Name
117990 117990 U-RY 2
Municipality / Province Postal Code
GEORGIAN BUSS. On NYKSN7
I endorse 5 cott Cotto as a candidate and declare that I am qualified to be an elector in this municipality.
202Q 08 /2 gu
Jin contract Signature Chy/2/22 Date (vvv/mm/dd)
Signature Date (yyyy/mm/dd)
Name of person providing endorsement
Last Name or Single Name Given Name(s)
SLED SCUTT
Qualifying Address
Suite/Unit No. Street No. Street Name
122365 GREY COMPY ROND 5
Municipality Province Postal Code
GOORGIAN, BLOFFS ON. NYK-5NS
I endorse SCUTT CATTO as a candidate and declare that I am qualified to be an elector in this municipality.
1
AUG (3/6)A
Signature Daté (yyyy/mm/dd)
Name of person providing endorsement
Last Name or Single Name Given Name(s)
HOLLY SLED HOLLY
Qualifying Address
Suite/Unit No. Street No. Street Name
122365 GROY COUNTY KOSES
Municipality Province Postal Code
GOURGIAN BUFFS ON. MKSUS
I endorse SCOTT CATTO as a candidate and declare that I am qualified to be an elector in this municipality.
11/10/
- AM Aled Anois 122
L Signature Date (yyyy/mm/dd)

Save Form

Print Form

Clear Forn

- 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)			
Potter	N Bernice			
Qualifying Address	10101111			
117279 GREY RO3 R.R.47	CARA -			
Municipality GEORGIAN BLUFFS	Province Postal Code ONT NOH-ZNO			
I endorse SCOTT CATTO as a cano	lidate and declare that I am qualified to be an elector in this municipality.			
4Buriellatto	2022 08 17			
Signature				
Name of person providing endorsement				
Last Name or Single Name	Given Name(s)			
POTTER	EDWARD A.			
Qualifying Address	•			
Suite/Unit No. Street No. Street Name				
117879 GIREY ROB R.R.Y	TARA			
Municipality	Province Postal Code			
GEORGIAN BLUFFS.	ONT. NOHZMO			
I endorse 5 COTT CATTO as a candidate and declare that I am qualified to be an elector in this municipality.				
1. 11				
~ Told Kastto				
Signature	Date (yyyy/mm/dd)			
Name of person providing endorsement				
Last Name or Single Name	Given Name(s)			
PORTEGUS	Carolyn			
Qualifying Address				
Suite/Unit No. Street No. Street Name				
200133 Side Rd. 10				
Municipality Georgian Bluffs	Province Postal Code ONT. NOH AKO			
l endorse SCOTT CATTO as a cand	didate and declare that I am qualified to be an eléctor in this municipality.			
Carolyn Porteous Signature	<u> </u>			

Save Form

Print Form

Clear Form

- 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		903
Municipality	Province P	ostal Code
I endorse Angle as a candid	late and declare that I am qualified to be an elector	in this municipality.
Signature	Date (yyyy/mm/d	dd)
Name of person providing endorsement		
	Given Name(s)	
Best	Jeff	
Qualifying Address		
Suite/Unit No. Street No. Street Name		
122392 Gre	y Rd 5	
Municipality	Province P	ostal Code
Georgian Bluffs	1 00	04K 5N5
I endorse Scott CATTO as a candid	late and declare that I am qualified to be an elector	in this municipality.
JABEST Signature	Que 14/22 Date (yyyy/mm/c	Qdd)
		A WAS THE STATE OF
Name of person providing endorsement	Circa Nama(a)	
	Given Name(s)	
Principe Best	michelle	
Qualifying Address		
Suite/Unit No. Street No. Street Name	016	
122392 61	Province P	Postal Code
Municipality		. /
Georgian Bluts	- ON	N4KSNS
I endorse <u>Scott CATTO</u> as a candid	date and declare that I am qualified to be an elector	r in this municipality.
100 LOO REAL	Cua 14/22	
Signature	Date (yyyy/mm/c	dd)
		The second secon

- 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)	
Thomoson Labya	
Qualifying Address	
Suite/Unit No. Street No. Street Name	
122338 Grey County Road 5	
Municipality Province F	Postal Code
Georgian Bloffs Ontario 1	N445NS
I endorse Scott Cotto as a candidate and declare that I am qualified to be an electo	or in this municipality.
	17.1
2 layd (hompsen 3032/08)	14
Signature Date (yyyy/mrh/	/dd) [′]
Name of person providing endorsement	
Last Name or Single Name Given Name(s)	
Coutto Ethel Elaine	
Qualifying Address	· · · · · · · · · · · · · · · · · · ·
Suite/Unit No. Street No. Street Name	
122414 Gray County Road 5	
Municipality Province F	Postal Code
	14K 5NE
I endorse Scott Cotto as a candidate and declare that I am qualified to be an elector	or in this municipality.
	1
2022/08	14
Signature Date (yyyy/mm/	/dd) \
Name of person providing endorsement	And the second s
Last Name or Single Name Given Name(s)	
Mielhausen Jennifer	
Qualifying Address	
Suite/Unit No. Street No. Street Name	
122414 Grey County Road 5	
Municipality Province	Postal Code
Georgian Bloffs Ontario	N4K SN5
I endorse Scott Courto as a candidate and declare that I am qualified to be an elector	or in this municipality.
12 Mulh 2022/08/	14
Signature Date (yyyy/mm/	/dd)

Page 2 of 2

- 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)	
MUNDUE	Bonni	<u></u>
Qualifying Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Suite/Unit No. Street No. Street Name		
081452 Roy comy	Com 5	
Municipality		Province Postal Code
GEORGIAN BLUFFS	-	ONI MOHZWO
I endorse Scott CATTO as a cand	lidate and declare	that I am qualified to be an elector in this municipality.
,		2062 08 12
Banniel Muralle		Clas 12, 2022
Signature		Date (yyyy/mm/dd)
Name of person providing endorsement		
Last Name or Single Name	Given-Name(s)	10 m
Dar to of	Debbie	
	1 001 0	
Qualifying Address		
Suite/Unit No. Street No. Street Name	1 5	er (A)
	d 5.	ID 110-1-
Municipality / /		Province Postal Code NYK5N6
l endorse SCOTT CATTO as a cand	lidate and declare	that I am qualified to be an elector in this municipality.
3/3/10/10		2022 08/2
Collins bald		Λ ~
The lee Juyou		Date (yyy/mm/dd)
Signature		Date (yyyy/mm/dd)
	and the same of th	
Name of person providing endorsement		
Last Name or Single Name	Given Name(s)	
COWTAN	CAROL	
Qualifying Address		
Suite/Unit No. Street No. Street Name		
137536 CON 7		H
Municipality GEORGIAN BLUFF.	Ś	Province Postal Code N4K 5N5
l endorse Scott CATTO as a cano	didate and declare	that I am qualified to be an elector in this municipality.
Carol Cartan		Aug. 12/22
Signature		Date (yyyy/mm/dd)
3.9.14.4.5		Processor Control of C

Save Form

- 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)	KEN	
COWTAN		11210	
Qualifying Address			
Suite/Unit No. Street No. Street Name .			
137536 CON. 7			
		Province	Postal Code
Municipality GEORGIAN BLUFF.		ON	N4K575
I endorse <u>SCUTT CATTO</u> as a car	ndidate and declare	that I am qualified to be an elec	tor in this municipality.
10 0 1		2022	28 /2
Ren Cowtan		Qual2/3	22
Signature		/Date (yyýy/mr	n/dd)
Name of person providing endorsement			
Last Name or Single Name	Given Name(s)	1	
PRINGLE		LORENDA	
Qualifying Address			
Suite/Unit No. Street No. Street Name	_ ,	Ω	
082464	Sdrd 6	Kwen Lound	
Municipality		Province	Postal Code
GEORGIAN BLUFFS		Mario	N4K-5N5
	ndidate and declare	that I am qualified to be an elec	tor in this municipality.
3601.		, ,	1
Landa V. do		2077 /05	7/116
Signature Signature		Date (vyvy/mr	6/dd)
Cignature		Date (yyyy,	in a a y
	AND AMPRICA CONTRACTOR	E.	
Name of person providing endorsement	1		
Last Name or Single Name	Given Name(s)		
tringle	1 (TR	AUT	
Qualifying Address			
Suite/Unit No. Street No. Street Name	(
082464 Siderago	%	2	
		Province	Postal Code
Municipality Georgian Buses		00 1	LAK SINZ
	ndidate and declare	that I am qualified to be an elec	tor in this municipality.
		. /	1 .
The same of the sa		3077 08	114
Signature		Date (yyyy/mr	m/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)
VAN MEER	Given Name(s) (Kees) CORNELIS
Qualifying Address	
Suite/Unit No. Street No. Street Name	
122427 GREY CO	OUNTY ROAD S
Municipality	Province Postal Code
GEORGIAN BUFFS	ON. 14K5US
l endorse Scott CATTO as a c	candidate and declare that I am qualified to be an elector in this municipality.
Ka Vantha	Pate (yyy/mm/dd)
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
MOULDER	MARY JANE
Qualifying Address	
Suite/Unit No Street No. Street Name	
122427 GPBY	Court ROAD 5
Municipality	Province Postal Code
GFORGIAN BLUFFS	011 114 5135
	1070
l endorse Scott (1170 as a d	candidate and declare that I am qualified to be an elector in this municipality.
200 50 11	0
Signature	Aug 16/22 Date (www/mm/dd)
Signature Signature	Date (yyyyminwdd)
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
DOWNS	CREGORY
Qualifying Address	,
Suite/Unit No. Street No. Street Name	RD 5
Municipality	Province Postal Code
6-00RGHAV BUFFS	8N7 N4/505
l endorse Scott (ATTO as a c	candidate and declare that I am qualified to be an elector in this municipality.
heer bolens	Sag 16 /22
Signature	(yyyy/mrh/dd)
	V
Save Form	Clear Form



Ministry of Municipal Affairs

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	Given Name(s)
CATTO	Soft ceruing.
Endorsement signatures for the nomination of a person for an office in	n the municipality of
CEORCIAN BUFF	in the year 2020
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
mc Keeman	TRICIA
Qualifying Address	
Suite/Unit No. Street No. Street Name 122450 Grey Roa	5 0.5.
I Municipality	Province Postal Code
Georgian Bluffs	ON N433N5
as a ca Signature Scott Carto as a ca	ndidate and declare that I am qualified to be an elector in this municipality. 2022 08/16 Date (yyyy/mm/dd)
Name of person providing endorsement	
Last Name or Single Name	Given Name(s) James Je Herson
Qualifying Address	
Suite/Unit No. Street No. Street Name 122438 Grey Rd	5
Municipality Georgian Bluffs	Province Postal Code ON. V4K5N5
I endorse Scott CATTO as a ca	ndidate and declare that I am qualified to be an elector in this municipality.
Signature	2027/02/17
	D. "V. A. " A A 1

- 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	/-X	
Last Name or Single Name Given Name	MAXINE	
HOLOTUK G.	MAXINE	
Qualifying Address		
Suite/Unit No. Street No. Street Name	-	
129417 (-rea Kol 8	9	
Municipality Georgan Bluff	Province ONT	Postal Code ル4K SルS
I endorse Scott CATTO as a candidate and de	clare that I am qualified to be an elect	or in this municipality.
Grayus Holotuk	A Lg 16 Date (yyyy/mn	/2002 Mdd)
Name of person providing endorsement	2/0)	
Last Name or Single Name Given Name	MARTIN	
KEMMERS	MAKIOV	
Qualifying Address		
Suite/Unit No. Street No. Street Name	_	
Municipality GORGHAN BLUFFS	Province	Postal Code
I endorse 5cott C45TO as a candidate and de	clare that I am qualified to be an elect	or in this municipality.
M. Au Panne	2092/08	2/16
Signature	Date (yyyy/mm	//dd)
	,	real section of the s
Name of person providing endorsement		
Last Name or Single Name Given Name	e(s)	
Qualifying Address		
Suite/Unit No. Street No. Street Name		
Municipality	Province	Postal Code
Warnorpairty		
I endorse 5 cott CottO as a candidate and de	clare that I am qualified to be an elect	or in this municipality.
Signature	Date (yyyy/mr	n/dd)
	ALCOHOL STATE OF THE STATE OF T	Ñ.



Ministry of Municipal Affairs

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 see	eking nomination				
Last Name or Single	Name		Given Name(s)	5	a a/)
_CATTO			Scott	WILLIA	H///
Endorsement signatu	res for the nomination	of a person for an office in	the municipality of		
GTCR61AL	Buffs		in the	he year <u>3322</u> .	
Name of person pro	viding endorsement				
Last Name or Single	Name		Given Name(s)		
Y . S			Robert		
Qualifying Address					
Suite/Unit No.	Street No.	Street Name			
	123	ISHWAR DRU	IE		
Municipality	1 145	1 10 HONE DATE		Province	Postal Code
	BLUFFS			OURATUO	NOH 130
1			lidate and declare t		
l endorseSCS	TT CATTO	as a cand	idate and declare t	that I am qualified to be	an elector in this municipality.
Lat Kaufuneur 2022 / 08/08 Signature Date (yyyy/mm//dd)					
Name of person pro	oviding endorsement				
Last Name or Single			Given Name(s)		
I			Marco	100	
Qualifying Address Mary Lou					
Suite/Unit No.	Street No.	Street Name	9		
120330	Our out it is	Grey Con	J. , 0000	05	
Municipality		TO, Of an	rig noo	C 5 Province	Postal Code
Georgia	in Bluff	S	J	Ontario	N4KEN5
I endorse Sco	off Catt	as a can	didate and declare	that I am qualified to be	an elector in this municipality.
1 Pres	1/_)		0 1	. 1
<i></i>	1 hom	gnature		<u>2022/0</u> Date (<u> </u>