

**FORM 11
(SECTION 44)**

**NOMINATION PAPER
(MAYOR OR OTHER COUNCIL MEMBER)**

We, the qualified electors whose names appear on the amended list of electors of the
Town/Municipality/Regional Municipality of _____,

nominate _____ of
(name)

(civic address)

_____ *(postal code)*

(include mailing address if different than civic address)

as a candidate for the office of _____ for the election to be held
on

the _____ day of _____, _____.

Name (please print)	Civic Address	Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Note:

- 1. These electors must be qualified to vote at the election of the candidate.**
- 2. Nomination forms are open for inspection by the public once signed by the Returning Officer.**

**CONSENT AND OATH OR
AFFIRMATION OF CANDIDATE**

I solemnly swear (or affirm) that:

1. I (He/She), _____, consent(s) to the nomination.
(name as it should appear on the ballot paper)

2. I am (He/She is) a Canadian citizen.

3. I am (He/She is) of the full age of eighteen years.

4. I have (He/She has) been ordinarily resident in the Town/Municipality/Regional Municipality of _____, (or in an area annexed to the Town/Municipality/Regional Municipality), for a period of six months preceding nomination day and I intend (he/she intends) to continue to so reside.

5. I am (He/She is) not indebted to the Town/Municipality/Regional Municipality of _____ for any charges that are liens on property or taxes, or all instalments or interim payments that are due as of nomination day have been paid, and a certificate from the _____ to this effect is attached.

6. I have (He/She has) not been convicted of bribery or of committing a corrupt practice under the *Municipal Elections Act* within the five years preceding nomination day.

7. I have (He/She has) read the sections of the *Municipal Elections Act* related to persons disqualified to vote, to be nominated or to serve on a council and none of the reasons for disqualification listed in those sections apply to me (him/her).

8. I have (He/She has) read and I understand (he/she understands) the provisions of the *Municipal Elections Act* related to the requirement to take a leave of absence if I am (he/she is) an employee of the Town/Municipality/Regional Municipality within the meaning of those provisions.

9. I (He/She) will accept the office of _____ if elected.

10. I appoint (He/She appoints) _____ of
_____ as my (his/her) official agent
under the *Municipal Elections Act*.

Sworn (or affirmed) at _____

in the County of _____

this ____ day of _____,

_____, before me

Authorized Administrator of Oath
(Refer to Section 146)

Candidate (or Agent if authorized and the
authorization is attached)

RECEIPT

Received from the above-named candidate or from his/her agent on his/her behalf a completed nomination paper and the sum of _____ in legal tender or a certified cheque or money order made payable to the Town/Municipality/Regional Municipality of _____ as a deposit pursuant to the *Municipal Elections Act*.

Dated at _____ this _____ day of _____, _____.

Returning Officer