



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

TOWNSHIP OF BROCK

Nominated for the Office of

COUNCILLOR

Ward Name or Number (if any)

FIVE (5)

Nominee's name as it is to appear on the ballot paper (subject to agreement of the municipal clerk)

Last Name or Single Name

SMITH

Given Name(s)

TED

Nominee's full qualifying address

Suite/Unit Number

Street Number

Street Name

1740

CONCESSION 4, SUNDERLAND

Municipality

TOWNSHIP OF BROCK

Province

ONTARIO

Postal Code

L0C1H0

Mailing Address

☒ Same as qualifying address

Suite/Unit Number

Street Number

Street Name

Municipality

Province

Postal Code

Email Address

tedsmith1951@yahoo.ca

Telephone Number

705-464-7722

Telephone Number 2

Declaration of Qualification

I, TED SMITH, 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.

W. C. Ted Smith

Signature of Nominee

2026/07/29

Date (yyyy/mm/dd)

Date Received (yyyy/mm/dd)

2026/07/130

Time Received

9:30 am.

Initial of Nominee or Agent
(if filed in person)

T.S.

Signature of Clerk or Designate

[Signature]

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)