

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

Nominated for the Office of <i>Regional Councillor</i>	Ward Name or Number (if any)
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Nominee's name as it is to appear on the ballot paper (subject to agreement of the municipal clerk)	
Last Name or Single Name <i>Pettingill</i>	Given Name(s) <i>Cria</i>

Nominee's full qualifying address within municipality			
Suite/Unit Number <i>8</i>	Street Number <i>2055</i>	Street Name <i>Concession 4</i>	
Municipality <i>Sunderland, Brock</i>	Province <i>Ontario</i>		Postal Code <i>L0C 1H0</i>

Mailing Address <input checked="" type="checkbox"/> Same as qualifying address			
Suite/Unit Number	Street Number	Street Name	
Municipality <i>Township of Brock</i>	Province <i>Ontario</i>		Postal Code <i>L0C 1H0</i>

If nominated for school board, full address of residence within its jurisdiction			
Suite/Unit Number	Street Number	Street Name	
Municipality	Province		Postal Code

Municipality	Province	Postal Code
Email Address	Telephone Number	Telephone Number 2

Declaration of Qualification

I, *Cria Pettingill*, 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.

Cria
Signature of Nominee

2026/05/01
Date (yyyy/mm/dd)

Date Received (yyyy/mm/dd) <i>MAY 1 2026</i>	Time Received <i>10:00AM</i>	Initial of Nominee or Agent (if filed in person)	Signature of Clerk or Designate <i>[Signature]</i>
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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)
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