



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
Councilor

Ward Name or Number (if any)
Ward 2

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

Last Name or Single Name
Den Braasem

Given Name(s)
Ron

Nominee's full qualifying address

Suite/Unit Number	Street Number	Street Name
	<u>632</u>	<u>SIMCOE ST BOX 765</u>

Municipality <u>Beaverton</u> <u>BROCK</u>	Province <u>Ontario</u>	Postal Code <u>I0k1a0</u>
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Mailing Address ☐ Same as qualifying address

Suite/Unit Number	Street Number	Street Name
	<u>632</u>	<u>Simcoe Street Box 765</u>

Municipality <u>Beaverton</u> <u>BROCK</u>	Province <u>Ontario</u>	Postal Code <u>I0k1a0</u>
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Email Address <u>0068cougar@gmail.com</u>	Telephone Number <u>705 426 5085</u>	Telephone Number 2 <u>[REDACTED]</u>
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Declaration of Qualification

I, Ron Den Braasem, 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.

[Signature]
Signature of Nominee

2026 05 01
Date (yyyy/mm/dd)

Date Received (yyyy/mm/dd) <u>2026/05/01</u>	Time Received <u>11:10 am</u>	Initial of Nominee or Agent (if filed in person) <u>[Signature]</u>	Signature of Clerk or Designate <u>[Signature]</u>
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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)

Save Form

Print Form

Clear Form