

**Instructions:**

Complete sections 1 and 2 and submit this form in person or by mail to:  
 Town of South Bruce Peninsula 315 George St (P.O. Box 310) Warton, ON N0H 2T0

**1 Candidate**

Name of Candidate

Candidate for the Office of: (check one)

- Mayor
- Deputy Mayor
- Councillor
- Public School Trustee for the Bluewater District School Board

**2 Appointment of Agent**

Name of Agent (please print)	Signature of Agent
Name of Agent (please print)	Signature of Agent
Name of Agent (please print)	Signature of Agent
I appoint individual(s) noted above as agent(s) who may perform these actions on my behalf: <ul style="list-style-type: none"> <li><input type="checkbox"/> File Forms</li> <li><input type="checkbox"/> Pick Up Candidate Information</li> <li><input type="checkbox"/> Pick Up Voters' List(s)</li> <li><input type="checkbox"/> Pick Up Revision List(s)</li> <li><input type="checkbox"/> Other (please specify) _____</li> </ul>	
I understand that despite any appointment of agent, I retain full responsibility for compliance with all provisions of the <u>Municipal Elections Act 1996</u> , as amended and any other applicable law.	
Signature of Candidate:	Date:

Personal information on this form is collected under the authority of the *Municipal Elections Act (1996) s. 12 and s. 13* for the purpose of permitting a candidate to identify to the Clerk a person appointed as agent and authorized to file and receive election material. Pursuant to the *Municipal Elections Act (1996) s. 88* this document is a public record, despite anything in the *Municipal Freedom of Information and Protection of Privacy Act (1990)*, and, until its destruction, may be inspected by any person at the Town Clerk's Office at a time when the office is open. Questions about this collection can be directed to the Clerk, 315 George St Warton, ON N0H 2T0 Telephone: 519-534-1400 Ext 122.