Ontario

Ministry of Municipal Affairs and Housing

Endorsement of Nomination – Form 2

Municipal Elections Act, 1996 (Section 33)

Instructions

- Candidates must obtain a minimum of 25 original signatures.
- An individual providing an endorsement signature must be a Canadian citizen, aged 18 or older and have a qualifying address in the municipality. An individual may sign an endorsement for more than one person seeking nomination.
- The qualifying address provided must include the postal code.

Personal information collected on this form is obtained under the authority of sections 33 and 95 of the *Municipal Elections Act, 1996*. Under section 88 of the *Municipal Elections Act, 1996* (and despite anything in the *Municipal Freedom of Information and Protection of Privacy Act*) documents and materials filed with or prepared by the clerk or any other election official under the *Municipal Elections Act, 1996* are public records and, until their destruction, may be inspected by any person at the clerk's office at a time when the office is open.

Name of person seeking nomination

Last Name or Single Name	Given Name(s)

Endorsement signatures for the nomination of a person for an office in the municipality of

_____ in the year _____ .

Name of person providing endorsement – 1

Last Name or Single Name	Given Name(s)

Qualifying Address

Suite/Unit Number	Street Number	Street Name

Municipality	Province	Postal Code

I endorse _____ as a candidate and declare that I am qualified to be an elector in this municipality.

_____ Signature

_____ Date (yyyy/mm/dd)

Name of person providing endorsement – 2

Last Name or Single Name	Given Name(s)

Qualifying Address

Suite/Unit Number	Street Number	Street Name

Municipality	Province	Postal Code

I endorse _____ as a candidate and declare that I am qualified to be an elector in this municipality.

_____ Signature

_____ Date (yyyy/mm/dd)

 © King's Printer for Ontario, 2026

Name of person providing endorsement – 3

Last Name or Single Name	Given Name(s)

Qualifying Address

Suite/Unit Number	Street Number	Street Name

Municipality	Province	Postal Code

I endorse _____ as a candidate and declare that I am qualified to be an elector in this municipality.

_____ Signature

_____ Date (yyyy/mm/dd)

Name of person providing endorsement – 4

Last Name or Single Name	Given Name(s)

Qualifying Address

Suite/Unit Number	Street Number	Street Name

Municipality	Province	Postal Code

I endorse _____ as a candidate and declare that I am qualified to be an elector in this municipality.

_____ Signature

_____ Date (yyyy/mm/dd)

Name of person providing endorsement – 5

Last Name or Single Name	Given Name(s)

Qualifying Address

Suite/Unit Number	Street Number	Street Name

Municipality	Province	Postal Code

I endorse _____ as a candidate and declare that I am qualified to be an elector in this municipality.

_____ Signature

_____ Date (yyyy/mm/dd)