

Instructions

A nomination paper may only be filed in person or by an agent; it may not be faxed or emailed. 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

Waterloo Region

Nominated for the office of

Waterloo Regional Council Member for Cambridge

Ward name or no. (if any)

CAMBRIDGE

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

Last Name or Single Name

SHAVER

Given Name(s)

JEFFREY

Nominee's full qualifying address within municipality

Suite/Unit No.

Street No.

Street Name

1785

OAKVIEW

CRES

Municipality

CAMBRIDGE

Province

ONT

Postal Code

N3H 4R4

Mailing Address

 Same as qualifying address

Suite/Unit No.

Street No.

Street Name

Municipality

Province

Postal Code

If nominated for school board, full address of residence within its jurisdiction

Suite/Unit No.

Street No.

Street Name

Municipality

Province

Postal Code

Email Address

RYAN SHAVER@GMAIL.COM

Telephone No. (including area code)

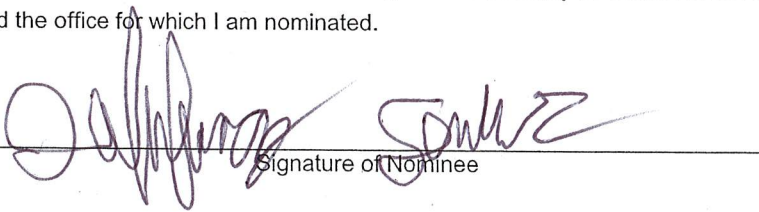
JEFFREY SHAVER

519 653 8975 Home

Telephone No.2 (including area code)

Declaration of Qualification

I, JEFFREY SHAVER, 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 of Nominee

2018 06 11

Date (yyyy/mm/dd)

Date Filed (yyyy/mm/dd)

2018/06/11

Time Filed

4:30 p.m.

Initial of Nominee or Agent

JS

Signature of Clerk or Designate


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)