

Ministry of Municipal Affairs

Endorsement of Nomination - Form 2

Municipal Elections Act, 1996 (Section 33)

- Complete additional forms as needed to obtain 25 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.

Name of person seeking nomination	
Last Name or Single Name	Given Name(s)
Jones	Erio
Endorsement signatures for the nomination of a person for an office in	the municipality of
Uxbridge	in the year <u>2022</u>
Name of person providing endorsement	170
Last Name or Single Name	Given Name(s)
Qualifying Address	
Suite/Unit No. Street No. Street Name	
Municipality UXDridge	Province Postal Code
l'endorse Erin Sancs as a car	ndidate and declare that I am qualified to be an elector in this municipality.
100	0110-18 2022
Signature	Date (yyyy/mrh/dd)
Name of person providing endorsement	la.
Last Name or Single Name Faddoul - Haddor K	Given Name(s)
Qualifying Address	
Suite/Unit No. Street No. Street Name	2100 4
Municipality Worldge	Province Postal Code P IR
l endorse Erico Torres as a car	ndidate and declare that I am qualified to be an elector in this municipality,
Signature	Date (Vyvy/mm/dd)

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Name of person providing endorsement	
Last Name or Single Name Given N	ame(s)
Bondrean	Lori
Qualifying Address	
Suite/Unit No. Street No. Street Name Centre	Road
Municipality (1 d d d d d d d d d d d d d d d d d d	Province Postal Code
Uxbridge	DN LAPIAT
I endorse Erin Jones as a candidate and	declare that I am qualified to be an elector in this municipality.
Lon Boudea Signature	20 22 /08 / 17 Date (yyyy/mm/dd) (
Name of person providing endorsement Last Name or Single Name TURNER Given N	ame(s) CAROL
Qualifying Address	
Suite/Unit No. Street No. Street Name 34 CENTRE RO	AO
Municipality UXBRIDGE	Province Postal Code L9P /A7
I endorse <u>Erin Jones</u> as a candidate and	declare that I am qualified to be an elector in this municipality,
P To a	3
Signature	
Name of wave as possible a and arrange	
Name of person providing endorsement Last Name or Single Name Given N	ame(s)
IUNIVER	CEIV
Qualifying Address	
Suite/Unit No. Street No. Street Name	EROAD
Municipality U + BRING F	Province Postal Code
I endorse EYIN JoneS as a candidate and	declare that I am qualified to be an elector in this municipality.
Su Tuna	2002/08/17
Signature	Date (yyyy/mm/dd)
	11-2

017-2233E (2018/04)

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Print Form

Clear Form

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Name of person providing endorsement	
Last Name or Single Name Given N	Name(s)
Turner Given	LYNN
Qualifying Address	
le u manuar	Λ
Suite/Unit No. Street No. 34 Street Name Centre	. Road
Municipality	Province Postal Code
Uxbriage	Province ON Postal Code L9P A7
I endorse Frin Jones as a candidate an	d declare that I am qualified to be an elector in this municipality
Lynn Vuner	2027/08/17
Signature	Data (www/mm/dd)
o Signature	Date (yyyymmidd)
Name of person providing endorsement	
Last Name or Single Name Given N	Name(s)
Last Name or Single Name Jones Given N	vame(s) Jounes
Qualifying Address	
	\sim
Suite/Unit No. Street No. 35 Street Name	
Municipality / 1	Province Postal Code
· · Uxbridge	ON LAPTAB
l'endorse Erin Jones as a candidate an	d declare that I am qualified to be an elector in this municipality
	w w
Cay m Xana	Aug 17/2022.
700 4	<u> </u>
Signature	Date (yyyy/mm/dd)
ℓ	
Name of person providing endorsement	
	Name(s) Nip
Last Name or Single Name Given N	Name(s) Daniel
Qualifying Address	
Suite/Unit No. Street No. 2 Street Name	\cap
1 331 Centre t	
Municipality () ()	Province Postal Code
Uxbridge	DN L9P IAB
I endorse	d declare that I am qualified to be an elector in this municipality.
4 - 200	
Muer	2022-08-18
Signature	
	(//////

Save Form

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- · Complete additional forms as needed to obtain 25 signatures.
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7					
Name of person prov	iding endorsement				
Last Name or Single N	lame		Given Name(s)		
Caul	and		Jen		
Qualifying Address					
1 .	Street No.	Street Name			
	71	Qualic	Village	Λ	
Municipality	10	Quatar	viide	Province	Postal Code
. \ .(n'dro			F 7	Lapia
UADI	ide				1191/ IF(S
I endorse	Times	as a can	didate and declare	that I am qualified to be an ele	ector in this municipality.
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
7	- alle			2.2 /	20/11
	Si	gnature		Date (vy/v/r	0 <i>×</i> / <i>l</i> /
. (griataro		Date (yyyy),	
)				
Name of person prov	iding endorsement				
Last Name or Single N	ame		Given Name(s)		
Gowlan	\sim		Park		
Qualifying Address	* /	=	1 0000		
7 (S)	Street No.	Street Name			
, =	76	Quaker	Villaro		
Municipality	i O	- Anyka	11111	Province	Postal Code
1)Xhv	1400			notoric	1901AS
l endorse Enn	Fire 5	as a can	didate and declare	that I am qualified to be an ele	ector in this municipality.
	771093			7	
				1 10 5	108/11
1 -A	MA	gnature		Date (vvvv/n	2 / O 8 / //
1	/ 2 31	gnature		Date (yyyy/i	ninj/dd)
Name of person prov	iding endorsement				
Last Name or Single N	ame LA/	11/2	Given Name(s)	GARY	
	L711	100		GARY	
Qualifying Address					
	Street No. 🦐 🔔	Street Name			
	32	Cr	BNTRE	ZKN	
Municipality				Province	Postal Code
/	Lybri	derio			19P /15
	10111	age			- / · / · / · / · /
I endorse		as a cand	didate and declare	that I am qualified to be an ele	ector in this municipality.
		1			
4	Paral	Ame			
	any fi	gnature		Date (yyyy/r	nm/dd)
/	/ 4	, activity			
Save Form	* Form				Clear Form
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Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
HINZEL	B. CHERYL
Qualifying Address	
Suite/Unit No. Street No. Street Name	
46 SANDYHOO	
Municipality	Province Postal Code
UXBRIDGÉ	ONTARIO LAPIR8
I endorse <u>ERIN JONES</u> as a can	didate and declare that I am qualified to be an elector in this municipality.
Ralace Hina	2022/08/12
Blakeryl Hinzel Sighature	
	(77)
Name of person providing endorsement	To a second
Last Name or Single Name	Given Name(s)
Stater Malloson	H11150n
Qualifying Address	
Suite/Unit No. Street No. Street Name	31
Municipality	Province Postal Code
Uxbridge	ON LAPIAS
l endorse <u>Erin Jones</u> as a can	didate and declare that I am qualified to be an elector in this municipality.
0 00 00	1.0/1.
D. Sletter	2022/08/17
Signature	Daté (yyyy/mrh/dd)
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
Slater	Cary!
Qualifying Address	4
Suite/Unit No. Street No. Street Name	entre Rd.
Municipality	Province Postal Code
Usbrigge	ON 29P1A8
l endorse Erin Jones as a cand	didate and declare that I am qualified to be an elector in this municipality.
Sand Next	2022/03/17
Signature	Date (yyyy/mm/dd)
J.g. ratars	

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Name of person providing endorsement		
Last Name or Single Name QUIRICE Given Name(s)	JENNIFER	LISA
Qualifying Address		
Suite/Unit No. Street No. Street Name LINTON CRT.		
Municipality	Province ,	Postal Code
UXBRIDGE	L ON	L9P 1L6
I endorse ERIN JONES as a candidate and declare	that I am qualified to be	an elector in this municipality.
Johnster Duirle Signature		108/12 yyyy/mm/dd)
Name of person providing endorsement		
Last Name or Single Name Quirke	CLEMENT	JOSEPH
Qualifying Address		
Suite/Unit No. Street No. Street Name LINTON COURT		
Municipality UXBRIDGE	Province	Postal Code L9P 1L6
<u> </u>	that I am qualified to be	an elector in this municipality.
6000		
Canto	2027	08/12
Signature	Date ()	yyyy/mm/dd)
Name of person providing endorsement		
Last Name or Single Name (S)	BUL	
Qualifying Address		
Suite/Unit No. Street No. Street Name		
100 PLANUS LAND	P	
Municipality	Province	Postal Code
D YBREDGE	ONT	19P1K6
I endorse <u>Errn Jones</u> , as a candidate and declare	that I am qualified to be	an elector in this municipality.
Mu hund	743	22/08/11
Signature/	Date (yyyy/mm/dd)

- Complete additional forms as needed to obtain 25 signatures.
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Name of person pro	oviding endorsemen				
Last Name or Single	Name		Given Name	e(s)	
LeRoy			RICHA	20	
Qualifying Address				<u> </u>	
Suite/Unit No.	Street No.	Street Name			
	62	CENTRE R	W		
Municipality				Province	Postal Code
	on Region	1- CHERLD	65	02	191815
Γ	-		M. FD		12////
I endorse	10 JOU	es as a	candidate and dec	clare that I am qualified to b	pe an elector in this municipality,
	- How			2022	108117
14		Signature		Date	LOS/17 e (yyyy/mm/dd)

	oviding endorsement		(f %: %:	8 3	
Last Name or Single	/)		Given Name	(s)	
	ekoy			Angela	
Qualifying Address			/	Δ	
Suite/Unit No.	Street No.	Street Name	O		
	60	Centre	Kd.		
Municipality	Ω		1 0	Province	Postal Code
Durk	ron Kla	100 - (1x1	pride	On	1 CAPIAS
I endorse	cin Jon	e S as a c	candidate and dec	clare that I am qualified to b	pe an elector in this municipality.
	0 (i I
	Slif	0 1 3 1		~ 022	108/17
-	91/3	Signature		Date	e (yyyy/m/m/dd)
					1
	oviding endorsement	t	1 P. 2005	e s	
Last Name or Single	Name		Given Name	(s)	
+ 1V	14			AMYUNGO	\
Qualifying Address		4			
Suite/Unit No.	Street No.	Street Name	ntre	Rel	
Municipality 1 1	1 100		1 X 2	Province	Postal Code
(V)	xonage	_		On-1	LAPIA8
I endorse	Trin Joi	nes. as a c	andidate and dec	lare that I am qualified to b	pe an elector in this municipality.
		1 1			2022 / /
	- Ou	de Sin	R)		2022/08/18
	S	Signature	1	Date	e (yyyy/mm/dd)

017-2233E (2018/04)

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Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
Clark	Given Name(s) Paula
Qualifying Address	II Proceedings
Qualitying Address	
Suite/Unit No. Street No. Street Name	Province Dr. Province Postal Code L9 P1 A3
68 Qua	ker Village Dr.
Municipality	Province Postal Code
Uphaide	ON LAPIAS
7,81,000	
I endorse Erin Jones as a cand	lidate and declare that I am qualified to be an elector in this municipality.
	The state of the s
- Care	
Signature	Date (yyyy/mm/dd)
Name of person providing endorsement	
Last Name or Single Name	Given Name(s)
CLARK	Given Name(s) SHIANNON
Qualifying Address	
	\overline{I}
Suite/Unit No. Street No. Street Name	Variable Do
\$ 68 QUAKER	VILLAGE DR.
Municipality	Province Postal Code
UXDriDEE	
	ON 19P1A3.
Tendorse ERIN JONES as a cand	idate and declare that I am qualified to be an elector in this municipality.
	, ,
	2022 /08 / 16 Date (yyyy/mm/dd)
	2022/08/16
Signature	Date (yyyy/mm/dd)
<u> </u>	
Name of person providing endorsement	
Last Name or Single Name	Given Name(s) ,.
Haron	King
Qualifying Address	(10)
Suite/Unit No. Street No. 7 Street Name	n
29 Centre	KO .
Municipality	Province Postal Code
Uxbrida	ON 19PIA8
1 6	
I endorse as a candi	idate and declare that I am qualified to be an elector in this municipality
A V	2 == 1 0/1
(luts	2022/08/18
Signature	Date (yyyy/mm/dd)
nave en la	

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Name of person pro	viding endorsement				
Last Name or Single	Name		Given Name(s)	1	
The	ompson			1an	
Qualifying Address	9.50				
Suite/Unit No.	Street No. 46	Street Name Bolton	n Drive		
Municipality	1 1			Province	Postal Code
N×	bridge			ON	LAP IWS
I endorse	in Jones	as a cand	idate and declare	that I am qualified to be an elec	tor in this municipality.
-#·	1. 1/1			- 1- 1-	1.0
	10-mor			2022/08	/ /3
	Si	gnature		Date (yyyy/mr	m/dd)
Name of person pro	viding endorsement				
Last Name or Single	_		Givon Namo(s)		
THOMPS			Given Name(s) NAOSA	VAAIH	
	2014		1011001	(* / / / / (/	
Qualifying Address Suite/Unit No.	I Street No.	Chroat Name			
	Street No.	Street Name BOLTON	DRIVE		
Municipality \bigvee $ imes$	bridge			Province ON	Postal Code L9PIW5
Tendorse Eri	n Jone	s a cand	idate and declare	that I am qualified to be an elec	tor in this municipality.
-	1				
	1 In	mosm		<u> </u>	8/15
· -	Sig	nature		Date (yyyy/mr	m/dd)
		· 			
r					
Name of person pro	_				
Last Name or Single I	Name		Given Name(s)		
Qualifying Address					
Suite/Unit No.	Street No.	Street Name			
Municipality				Province	Postal Code
I endorse					
		as a candi	idate and declare	that I am qualified to be an elec	tor in this municipality.
				2	
	Sig	nature		Date (yyyy/mr	m/dd)
					Tipe -
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Name of person pro	viding endorsement				
Last Name or Single	Name		Given Name(s)		
Cough	un		Carly		
Qualifying Address			T		
Suite/Unit No.	Street No.	Street Name	Drive		
Municipality ,				Province	Postal Code
Uxbr	Jage			00	L9POB2
l endorse Eri	n Jones	as a cand	idate and declare	that I am qualified to be an elec	ctor in this municipality.
1/2	Lym	- plat		2022	-/08/10 m/dd)
- U	Sig	nature		Date (yyyy/m	m/dd)
Name of person pro	viding and areament				
Name of person prov Last Name or Single N	=		Given Name(s)		
Last Name of Single I	varrie		Given Name(s)		
Qualifying Address					
Suite/Unit No.	Street No.	Street Name			
Municipality			3₩2	Province	Postal Code
I endorse		as a cand	lidate and declare	that I am qualified to be an elec	ctor in this municipality.
· ·	Sig	nature		Date (yyyy/m	m/dd)
Name of person pro	viding endorsement				
Last Name or Single N	_		Given Name(s)		
Qualifying Address					
Suite/Unit No.	Street No.	Street Name			
Municipality				Province	Postal Code
I endorse		as a cand	idate and declare	that I am qualified to be an elec	ctor in this municipality.
	Siç	gnature		Date (yyyy/m	ım/dd)
Save Form Pri	nt Form				Clear Form

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Name of person providing endorsement				
Last Name or Single Name	Give	n Name(s)		1/0
LASZLO	1 3	ACQ	UELINE	MARIE
Qualifying Address				
Suite/Unit No. Street No. Street Name				
	RACHEL	L LE	E CRT.	
Municipality			Province	Postal Code
UXBRIDGE			ONT	L9P1W5
lendorse <u>ERIN</u> JONES	as a candidate	and declare	e that I am qualified to be	an elector in this municipality,
Juqueline Z			2022 Date (/08///
o de la compania del compania del compania de la compania del la compania de la compania del la compania d) sate (yyyymmud
Name of person providing endorsement				
Last Name or Single Name	Give	n Name(s)		
Qualifying Address				
Suite/Unit No. Street No. Street Name				
Municipality			Province	Postal Code
I endorse Erin Jones	as a candidate	and declare		an elector in this municipality.
Signature			Date (yyyy/mm/dd)
Name of person providing endorsement Last Name or Single Name	Give	n Name(s)		
Qualifying Address				
Suite/Unit No. Street No. Street Name				
Municipality			Province	Postal Code
I endorse Erin Jones	as a candidate	and declare	e that I am qualified to be	an elector in this municipality.
Signature			Date (yyyy/mm/dd)
Save Form Drint Com				Clare F.