

# District of Parry Sound



**Nomination Paper  
FORM F1**

I \_\_\_\_\_  
(Name of Candidate/Nominee)  
**(Please print your name as you want it to appear on the ballot)**

OF

\_\_\_\_\_  
(Qualifying Address)

Hereby put forward my name as a candidate for the office of PSDSSAB member representing the Territory Without Municipal Organization (TWOMO) and I further declare that I am legally qualified to hold office for which I have been nominated.

\_\_\_\_\_  
Signature of Candidate/Nominee

\_\_\_\_\_  
Date

Bus. Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Mailing Address if different from  
Qualifying Address

\_\_\_\_\_

Note: A person who has been nominated may withdraw their nomination by filing a written withdrawal with the Returning Officer by 2:00 PM on Friday, August 21, 2026. A candidate who is running for municipal office may run as a member to represent DSSAB but, if elected to both positions, is permitted to hold only one office.