District of Parry Sound

Social Services Administration Board Nomination Paper FORM F1

(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 19, 2022. 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.

Completed Nomination Papers can be submitted via email to: <u>twomo@psdssab.org</u> or mailed to: Jennifer Harris, 1 Beechwood Drive, Parry Sound, Ontario, P2A 1J2