



LOCAL GOVERNMENT ELECTION

FORM T

*[Subsection 104(1) of the Act]*

**Appointment of Candidate's Agent**

This is to certify that \_\_\_\_\_  
*(Name – please print)*

Of \_\_\_\_\_  
*(Address – please print)*

Is authorized to be my agent for the purpose of submitting my Nomination forms for the office of

\_\_\_\_\_ for the election to be held on the 13<sup>th</sup> day of November, 2024.  
*(Mayor/Councillor)*

Dated at \_\_\_\_\_, this \_\_\_\_ day of \_\_\_\_\_, 2024.

\_\_\_\_\_  
*(Candidate)*