

**NOTE: This form replaces Section 7 of the Nomination Paper**

# Supporting signature: COVID 19

Candidate: \_\_\_\_\_

Ward: \_\_\_\_\_

Elector's name: \_\_\_\_\_

I support the above-mentioned candidate for the position of:

Commissioner

Chair

I am not supporting the above-mentioned candidate.

Elector's Address: \_\_\_\_\_

Elector's Signature: \_\_\_\_\_

## COVID 19 Safety Measure Checklist

- A meeting was scheduled in a safe location (ex. outside, private residence, public place allowing for the respect of government safety guidelines, etc.) with the under-mentioned elector in order to obtain their support for my nomination;
- An adequate time was given between individuals coming to support my nomination to reduce the number of individuals assembled in one location at the same time;
- Disinfectant was made available to all electors coming to support my nomination;
- Both I, the candidate, and the supporting elector wore masks during our meeting;
- The supporting elector was invited to use his own pen;
- Each supporting elector signed the designated form;
- All equipment (ex. chair, table) used during the meeting was disinfected before and after the meeting;
- The hand hygiene rules were adhered to with respect to the handling of all forms filled out by a supporting elector;
- A distance of 2m was respected during the entire duration of the meeting and there wasn't any direct physical contact (ex. handshake);
- A register recording the names and numbers of all individuals I met, including those that did not support my nomination, is being kept in the eventuality that contact tracing is required.

**I hereby confirm that the above-mentioned guidelines have been respected**

Candidate/ Mandatory Name: \_\_\_\_\_

Candidate/ Mandatory Signature: \_\_\_\_\_