

**Withdrawal of Nomination**  
**Form EL19**  
***Municipal Elections Act, 1996 s.36***



I, \_\_\_\_\_, hereby withdraw my own name as candidate for  
**Name (Please Print)**

☐ Councillor

\_\_\_\_\_  
**Signature of Candidate**

\_\_\_\_\_  
**Date**

As Agent, I, \_\_\_\_\_, file this withdrawal on behalf of  
**Name (Please Print)**

\_\_\_\_\_  
**Candidate's Name (Please Print)**

\_\_\_\_\_  
**Signature of Agent**

\_\_\_\_\_  
**Date**

**Clerk's Confirmation**

This Withdrawal delivered to me at \_\_\_\_\_ (time) this \_\_\_\_\_ day of  
\_\_\_\_\_, 2025.

\_\_\_\_\_  
**Signature of Clerk or Designate**

**Stop:** Check ID of person filing withdrawal.

**Privacy Statement:** Information on this form is being collected under the authority of the *Municipal Elections Act* and will be used for the nomination process in the 2025 Municipal By-Election. Please note that this form, once signed, will be available for inspection by members of the public at the Clerk's Office in accordance with the applicable legislation. Questions about the collection of this information may be directed to the Returning Officer/Clerk at the Town of LaSalle, 5950 Malden Road, LaSalle, N9H 1S4, Telephone: 519-969-7770.