

**Notice of Registration –  
Third Party – Form 7**  
*Municipal Elections Act, 1996 (Section 88.6)*

**Instruction**

It is the responsibility of the person incurring expenses to file a complete and accurate notice. Please print or type information (except signatures).

**Box A: Notice of Registration (Individuals, Corporations and Trade Unions)**

Registration for an Individual, Corporation or Trade Union in the Following Municipality

SPRINGWATER

Name of Individual, Corporation or Trade Union (Registrant)

KENNETH JENNINGS

Mailing Address (Registrant)

Suite/Unit Number

Street Number

Street Name

3 OLD INDIAN TRAIL

Municipality

RAMARA

Province

ONTARIO

Postal Code

L0R1B0

Email Address

kennethjennings@gmail.com

Telephone Number

705 242 0056

Telephone Number 2

202 378 4868

**Box B: Designation of an Official Representative (Corporations and Trade Unions)**

Name of person signing (Official Representative)

Last Name or Single Name

Given Name(s)

Mailing Address (Official Representative)

Suite/Unit Number

Street Number

Street Name

N/A

Municipality

Province

Postal Code

Email Address

Telephone Number

Telephone Number 2

**Box C: Additional Information (Corporations)**

Business Name

N/A

Corporation Number (Indicate whether Ontario Corporation Number, Federal Corporation Number, etc.)

Names of Principal Officers

|  |   |   |
|--|---|---|
|  | - | - |
|  | - | - |
|  | - | - |
|  | - | - |
|  | - | - |
|  | - | - |
|  | - | - |

Add Principle Officer (+)

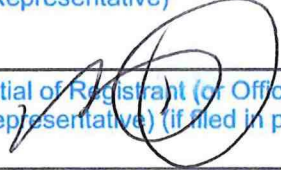
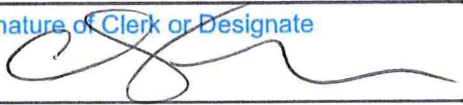
**Box D: Declaration of Qualification**

I, KFOX JENNINGS, the Registrant (or Official Representative of the Registrant), referred to in this notice, do hereby declare that:

- (1) The information in this notice of registration is, to the best of knowledge and belief, true;
- (2) The Registrant is qualified to be registered as a third party advertiser; and
- (3) I am authorized to sign on behalf of the Registrant (applies only where the Registrant is a corporation or trade union).

  
Signature of Registrant (or Official Representative)

OCTOBER 1, 2026  
Date (yyyy/mm/dd)

| Date Received (yyyy/mm/dd) | Time Received  | Initial of Registrant (or Official Representative) (if filed in person)           | Signature of Clerk or Designate                                                     |
|----------------------------|----------------|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <u>OCT 1 2026</u>          | <u>4:24 PM</u> |  |  |

**Certification by Clerk or Designate**

I, the undersigned clerk of this municipality, do hereby certify that I have examined the notice of registration of the aforesaid registrant filed with me and am satisfied that the registrant is qualified to incur expenses and that the notice of registration complies with the Act.

Signature of Clerk or Designate 

Date Certified (yyyy/mm/dd)  
2026 10 01

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