NOMINATION PAPER AND CANDIDATE'S ACCEPTANCE

Local Authorities Election Act (Sections 12, 21, 22, 23, 23.1, 27, 28, 47, 68.1, 151, 158.3, Part 5.1) Education Act (Sections 4(4), 74)

The personal information collected through this form is for administering the election. This collection is authorized by section 33(c) of the *Freedom of Information and Protection of Privacy Act*. For questions about the collection of personal information, contact

MOUNTAIN VIEW COUNTY		403-335-3311
Business Title/Organization		Business Phone Number
10-1408 TWP RD 320, P.O. BAG 100	DIDSBURY	AB TOM OWO
Address	City or Town	Province Postal Code
LOCAL JURISDICTION:	MOUNTAIN VIEW COUNTY	, PROVINCE OF ALBERTA
We, the undersigned electors of	MOUNTAIN VIEW COUNTY DIVIS	SION 5
nominate Angelos Au	Name of Local Jurisdiction and Ward (if	applicable)
- Trugegoe Tim	Candidate's Surname and Given Names	
	Complete Address and Postal Code	
as a candidate at the election about to be held	for the office of COL	JNCILLOR
		Nominated for
of	MOUNTAIN VIEW COUNTY	-
	Name of Local Jurisdiction	
Authorities Election Act and sections 4(4) and	LIGIBLE TO VOTE in this election in accordance 74 of the Education Act (if applicable). If a city or a 7(2) of the Local Authorities Election Act, then the Complete Address and Postal Code of Election Act	a board of trustees under the signatures of up to 100 electors
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Heidi Overgoard Gerald Ingeveld		How he
GLEN BRADLEY		Is Due
STEDS DUERGUARD		The sil
CONNIE VOLK		Conne Valk
GORDON ALLEN		114.6.0
		1.4.361

CANDIDATE'S ACCEPTANCE

I, the above-named candidate, solemnly swear (affirm) that

I am eligible under sections 21 and 47 (and section 12, in the case of summer villages) of the Local Authorities Election Act and sections 4(4) and 74 of the Education Act (if applicable) to be elected to the office,

I am not otherwise disqualified under section 22, 23 or 23.1 of the Local Authorities Election Act,

I will accept the office if elected.

I have read sections 12, 21, 22, 23, 23.1, 27, 28, 47, 68.1 and 151 and Part 5.1 of the Local Authorities Election Act and sections 4(4) and 74 of the Education Act (if applicable) and understand their contents,

I am appointing

Name, Contact Information or Complete Address and Postal Code, and Telephone Number of Official Agent

as my official agent (if applicable),

I have provided a criminal record check with my nomination package (if applicable),

I will read and abide by the municipality's code of conduct if elected (if applicable), and

The electors who have signed this nomination paper are eligible to vote in accordance with the Local Authorities Election Act and the Education Act and resident in the local jurisdiction on the date of signing the nomination.

(Print name as it should appear on the ballot.)

Candidate's Surname

Candidate's Given Names (may include nicknames, but not titles, i.e. Mr., Ms, Dr.)

SWORN (AFFIRMED) before me

at the office of mountain View Country

in the Province of Alberta.

lature of Returning Officer or Commissioner for Oaths

Signature of Candidate

CALLIE DAVIS

A Commissioner for Oaths In and for the Province of Alberta. My Commission Expires Nov. 26, 20 27

IT IS AN OFFENCE TO SIGN A FALSE AFFIDAVIT OR A FORM THAT CONTAINS A FALSE STATEMENT

RETURNING OFFICER'S ACCEPTANCE

Returning Officer signals acceptance by signing this form:

Signature of Returning Officer