MOUNTAIN VIEW COUNTY

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)

403-335-3311

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

Business Title/Organization		Bu	isiness Phone	Number
10-1408 TWP RD 320, P.O. BAG 100	DIDSBURY		AB	TOM OWO
Address	City or Town	20	Province	Postal Code
LOCAL JURISDICTION:	MOUNTAIN VIEW COUNTY		, PROVINCE	OF ALBERTA
We, the undersigned electors of	MOUNTAIN VIEW COUNTY DIVISION	1_1	_	,
	Name of Local Jurisdiction and Ward (if appl	icable)	78	
nominate SHAW, E	DWARD T. Candidate's Surname and Given Names			of of
	Complete Address and Postal Code		100	
as a candidate at the election about to be held for the office of COUNCILLO				
	Office Nomi	inated f	or	
of	MOUNTAIN VIEW COUNTY			
	Name of Local Jurisdiction		P(Y)	
The candidate's local political party or slate is				(if applicable).
Authorities Election Act and sections 4(4) and 7	IGIBLE TO VOTE in this election in accordance with 4 of the Education Act (if applicable). If a city or a boa (2) of the Local Authorities Election Act, then the sign	ard of t	trustees und	er the
Printed Name of Elector	Complete Address and Postal Code of Elector		Signature	of Elector
Lloyd Glenn Bishell		7	MB.	shell
TRUDY REAP		C	Trudy	Reap
Rebecca Stoesser		R	buca St	vesser
Edwin M. Jensen		2	MA	
MIKE STUESSER		,	1/1/1	T

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)

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MOUNTAIN VIEW COUNTY		403-335-331	11
Business Title/Organization	 	Business Phone	Number
10-1408 TWP RD 320, P.O. BAG 10	DIDSBURY	AB	TOM OWO
Address	City or Town	Province	Postal Code
v8			
LOCAL JURISDICTION:	MOUNTAIN VIEW COUNTY	, PROVINCE	OF ALBERTA
We, the undersigned electors of	MOUNTAIN VIEW COUNTY DIVISION	1	,
	Name of Local Jurisdiction and Ward (if applic	able)	<u> </u>
nominate SHAW,	EDWARD J.		of
	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 COUNCIL	LOR	
	Office Nomin		-
of	MOUNTAIN VIEW COUNTY		
	Name of Local Jurisdiction		
The candidate's local political party or slat	e is		_ (if applicable).
Provide signatures of at least 5 ELECTOR Authorities Election Act and sections 4(4) a Education Act passes a bylaw under section	te is SELIGIBLE TO VOTE in this election in accordance with selection and 74 of the Education Act (if applicable). If a city or a boar on 27(2) of the Local Authorities Election Act, then the signal	ections 27 and 4 d of trustees und	7 of the Local
Provide signatures of at least 5 ELECTOR Authorities Election Act and sections 4(4) a Education Act passes a bylaw under section	RS ELIGIBLE TO VOTE in this election in accordance with seand 74 of the Education Act (if applicable). If a city or a boar	ections 27 and 4 d of trustees und stures of up to 100	7 of the Local
Provide signatures of at least 5 ELECTOR Authorities Election Act and sections 4(4) a Education Act passes a bylaw under section eligible to vote may be required.	S ELIGIBLE TO VOTE in this election in accordance with s and 74 of the Education Act (if applicable). If a city or a boar on 27(2) of the Local Authorities Election Act, then the signal	ections 27 and 4 d of trustees und stures of up to 100	7 of the <i>Local</i> er the D electors
Provide signatures of at least 5 ELECTOR Authorities Election Act and sections 4(4) a Education Act passes a bylaw under section eligible to vote may be required. Printed Name of Elector	RS ELIGIBLE TO VOTE in this election in accordance with s and 74 of the Education Act (if applicable). If a city or a boar on 27(2) of the Local Authorities Election Act, then the signal Complete Address and Postal Code of Elector	sections 27 and 47 of trustees und atures of up to 100 Signature	7 of the <i>Local</i> er the D electors
Provide signatures of at least 5 ELECTOR Authorities Election Act and sections 4(4) a Education Act passes a bylaw under section eligible to vote may be required. Printed Name of Elector Tudy Shyden	RS ELIGIBLE TO VOTE in this election in accordance with s and 74 of the Education Act (if applicable). If a city or a boar on 27(2) of the Local Authorities Election Act, then the signal Complete Address and Postal Code of Elector	sections 27 and 47 of trustees und atures of up to 100 Signature	of the Local er the Delectors of Elector

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.)

SHAW

Candidate's Surname

EDWARD 3

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 County

in the Province of Alberta,

this 14

day of

* August

Signature of Returning Officer or

Commissioner for Oaths

, 20 25

Signature of Candidate

Commissioner for Oaths Stamp

CALLIE DAVIS

A Commissioner for Oaths in and for the Province of Alberta. My Commission Expires Nov. 28, 2027

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:

nature of Returning Officer

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