



**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 section 44(4) of the *School Act* (if applicable) to be elected to the office;
- THAT I am not otherwise disqualified under section 22 or 23 of the *Local Authorities Election Act*;
- THAT I will accept the office if elected;
- THAT I have read sections 12, 21, 22, 23, 27, 28, 47, 68.1, and 151 and Part 5.1 of the *Local Authorities Election Act* and section 44(4) of the *School Act* (if applicable) and understand their contents;
- THAT I am appointing

\_\_\_\_\_  
 Name, Contact Information or Complete Address and Postal Code and Telephone Number of Official Agent (if applicable)  
 as my official agent.

- THAT I will read and abide by the municipality's code of conduct if elected (if applicable); and
- THAT the electors who have signed this nomination paper are eligible to vote in accordance with the *Local Authorities Election Act* and the *School 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      Given Names (may include nicknames, but not titles, i.e., Mr., Ms., Dr.)

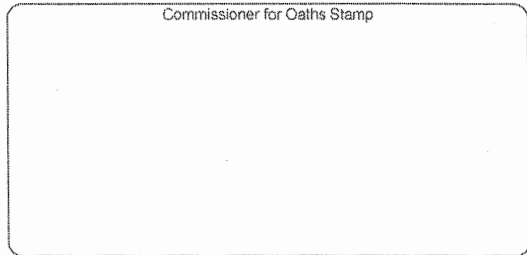
SWORN (AFFIRMED) before me

at the \_\_\_\_\_ of \_\_\_\_\_,  
 in the Province of Alberta,  
 this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.



\_\_\_\_\_  
 Candidate's Signature

\_\_\_\_\_  
 Signature of Returning Officer or Commissioner for Oaths  
 or Notary Public in and for Alberta  
 (Also include printed or stamped name and expiry date)



**RETURNING OFFICER'S ACCEPTANCE**

Returning Officer signals acceptance by signing this form:

\_\_\_\_\_  
 Signature of Returning Officer

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

# Candidate Information

*Local Authorities Election Act*  
(Section 27)

**Note:** The personal information on this form is being collected to support the administrative requirements of the local authorities election process and is authorized under section 27 of the *Local Authorities Election Act* and section 33(c) of the *Freedom of Information and Protection of Privacy Act*. The personal information will be managed in compliance with the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions concerning the collection of this personal information, please contact \_\_\_\_\_

\_\_\_\_\_  
Title of the Responsible Official

\_\_\_\_\_  
Business Phone Number

Candidate's Full Name \_\_\_\_\_

Candidate's Address and Postal Code \_\_\_\_\_

\_\_\_\_\_  
Address of place(s) where candidate records are maintained \_\_\_\_\_

\_\_\_\_\_  
Name(s) and address(es) of financial institutions where campaign contributions will be deposited (if applicable)

\_\_\_\_\_  
Name(s) of signing authorities for each depository listed above (if applicable)

\_\_\_\_\_  
Where there is any change in the above mentioned information, the candidate shall notify the local jurisdiction in writing within 48 hours of such changes by submitting a completed information form.