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

Town of Three Hills		403-443-582	22	
Business Title/Organization		Business Phone	Number	
PO Box 610, 232 Main Street	Three Hills	AB	TOM 2A0	
Address	City or Town	Province	Postal Code	
LOCAL JURISDICTION:	Town of Three Hills	, PROVINCE OF ALBERTA		
We, the undersigned electors of	Town of Three Hills		,	
	Name of Local Jurisdiction and Ward (if applicable)			
nominate			of	
	Candidate's Surname and Given Names			
	Complete Address and Postal Code			
as a candidate at the election about to be h	eld for the office of			
Office Nominated for				
of		14. CH-110.		
	Name of Local Jurisdiction			
The candidate's local political party or slate	e is		_ (if applicable).	
Authorities Election Act and sections 4(4) a	S ELIGIBLE TO VOTE in this election in accordance with s nd 74 of the Education Act (if applicable). If a city or a boar n 27(2) of the Local Authorities Election Act, then the signa	d of trustees und	ler the	
Printed Name of Elector	Complete Address and Postal Code of Elector	Signature	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,

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.

Candidate's Surname

Candidate's 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 ____.

Signature of Returning Officer or
Commissioner for Oaths

Commissioner for Oaths

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

RETURNING OFFICER'S ACCEPTANCE

Returning O	πicer signals accep	itance by signing	this form:		
Signature of Returning Officer					

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