

## Nomination Paper and Candidate's Acceptance Councillor

nominate

(Given Names)

of

Local Authorities Election Act (Sections 21, 22, 23, 23.1, 27, 28, 47, 68.1, 151, Page 1 of 2

Election Office Email <u>cao@marwayne.ca</u> Phone 780-847-3962

Local jurisdiction: Village of Marwayne, Province of Alberta We,

the undersigned electors of the Village of Marwayne

(Candidate's Surname)

	(Consulate Address and Bestal Code)	
	(Complete Address and Postal Code)	
as a candidate at the election about to be held for the office of		Councillor
	_	(Office Nominated For)
of Village of Marwayne (Name of Local Jurisdiction	n)	
Signatures of at least <b>five</b> sections 27 and 47 of the <i>Loc</i>	(5) electors eligible to vote in the last Authorities Election Act:	his election in accordance wit
Printed Name of Elector	Complete Address and Postal Code of Elector	Signature of Elector

Act;
THAT I will accept the office if elected;

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

**CANDIDATE'S ACCEPTANCE** 

the office;

THAT I have read sections 21, 22, 23, 23.1, 27, 28, 47, 68.1, and 151 and Part 5.1 of the *Local Authorities Election Act* and understand their contents;

THAT I am eligible under sections 21 and 47 of the Local Authorities Election Act to be elected to

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



## Nomination Paper and Candidate's Acceptance Councillor

Local Authorities Election Act (Sections 21, 22, 23, 23.1, 27, 28, 47, 68.1, 151, Part 5.1)
Page 2 of 2

**Election Office** 

Email cao@marwayne.ca Phone 780-847-3962

THAT I am appointing the following individual as my official agent (if applicable):

Name: Phone	Number:
Email Address:	
Complete Address and Postal Code:	
THAT I will read and abide by the municipality's cod	de of conduct if elected: and
THAT the electors who have signed this nomination the <i>Local Authorities Election Act</i> and resident in th nomination.	paper are eligible to vote in accordance with
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 in and for Alberta)	
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

The personal information on this form is being collected to support the administrative requirements of the local authorities election process and is authorized under sections 21 and 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 the Village at 780-847-3962.