

Nomination Paper and Candidate's Acceptance

Local Authorities Election Act (Sections 12, 21, 22, 23, 21.1, 27, 28, 47,68.1, 151, 158.3, Part 5.1)

The personal information collected through this form is for administering the election. This collection is authorized by section 4(c) of the *Protection of Privacy Act* and is managed and protected in accordance with the Act. For questions about the collection of personal information, contact the Access to Information Officer with the City of Fort Saskatchewan at 780-992-6200 or email elections@fortsask.ca

LOCAL JURISDICTION:	CITY OF FORT SASKATCHEWAN, PROVINCE OF ALBERTA		
ELECTION DATE:	Monday, October 20, 2025		
We, the undersigned elector	ors of the City of Fort Saskatchewan, Province of Alb	perta,_ NOMINATE	
		of	
(Candidate Surname)	(Candidate Given Names)		
		as a candidate at the election	
(Candidate's Residential Addr	ess and Postal Code)		
about to be held for the office			
of the City of Fort Saskatch	(Office Nominated for newan, Province of Alberta)	
27 and 47 of the Local Auth	ast 5 ELECTORS ELIGIBLE TO VOTE in this election or the selection of Fort Saskatchewan I	Bylaw C22-24.	
Printed Name of Ele	ector Complete Address and Postal Code of Elector	Signature of Elector	
1.			
2.			
3.			
4.			
5.			
•	e Nomination Paper, a Candidate may submit more signatures may be placed on the lines below.	than the required 5	
Printed Name of Elec	ctor Complete Address and Postal Code of Elector	Signature of Elector	

CANDIDATE'S ACCEPTA	NCE: I. the above	named candidate.	solemnly swear	(affirm)	:
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- THAT I am eligible under sections 21 and 47 of the Local Authorities Election Act to be elected to the office;
- THAT I am not otherwise disqualified under section 22, 23 or 23.1 of the Local Authorities Election Act;
- THAT I will accept the office if elected;
- THAT 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 understand their contents;
- THAT I am appointing as my official agent (if applicable)

(Name, email address and/or complete address and postal code and telephone number of official agent)

- THAT I will read and abide by the municipality's code of conduct if elected, and
- THAT the electors who signed this nomination paper are eligible to vote in accordance with the Local
 Authorities Election Act and resident in the City of Fort Saskatchewan on the date of signing the
 nomination.

Print name as it should appear on the ballot:		
(Candidate's Surname)		(Given Name) (may include nicknames, but not titles, i.e., Mr., Mrs., Dr.)
SWORN (AFFIRMED) BEFORE ME)	
at the,)	
in the Province of Alberta,)	Candidata'a Signatura
this, 2025)	Candidate's Signature
Signature of Returning Officer or Commission for (include printed or stamped name and expiry date)	Oaths	Commissioner for Oaths stamp
RETURNING OFFICER'S ACCEPTANCE Returning Officer signals acceptance by signing to	this form:	
Signature of Returning Officer		

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