

Nomination Paper and Candidate's Acceptance

Form 4

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

Education Act (Sections 4(4), 74)

	Email: ele	ection@vegreville.com Phone: 780-632-2606		
LOCAL JURISDICTION: Town of	of Vegreville, Province of Alberta			
We the undersigned electors of	of .	, nominate		
We the undersigned electors of	Name of Local Juris			
	Name of Local came	_		
Out tidata Command		of Officer Manager		
Candidate Surname	•	Given Names		
	Complete Address and Postal Code			
as a candidate at the election	about to be held for the office of			
		Office Nominated for		
of				
	ocal Jurisdiction	•		
	TORS ELIGIBLE TO VOTE in the			
	Authorities Election Act and secti			
` ' ' '	board of trustees under the <i>Edu</i> o <i>orities Election Act</i> , then the sign	•		
be required.	online Electron of, then the digit	atares of up to 100 diodiois may		
·	1	1		
Printed Name of Elector	Complete Address and	Signature of Elector		
	Postal Code of Elector	5		



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Email: election@vegreville.com Phone: 780-632-2606

CANDIDATE'S ACCEPTANCE

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

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 21, 22, 23, 23.1, 27, 28, 47, 68.1, and 151 and Part 5.1 of the *Local Authorities Election Act* and the *Education Act* (if applicable) and understand their contents;

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

Name, Contact Information or Complete Address and Postal Code and Telephone Number of Official Agent (if applicable)

THAT I will read and abide by the municipality's code of conduct if elected; and

THAT the electors who have signed this nomination paper are eligible to vote in accordance with the Local Authorities Election 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	s Surname	Given Names – may include			e nicknames, but not titles, i.e. Mr., Ms., Dr.	
SWORN (AFFIR	MED) BEFORE	ME		7		
at the	of					
in the Province of	of Alberta,					
this da	ay of	, 20 <u> </u>	<u>.</u>	<u> </u>	Candidate's Signature	
Signature of Returning and for Alberta	g Officer or Commis	sioner for (Oaths in	J		
RETURNING OFF Returning officer				this form:		
	Signature of Retu	rnina Office	er		_	

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

Page 2 of 2

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 Legislative Services at 780-632-2606.