

Local Authorities Election Act
 (Sections 12, 21, 22, 23, 27, 28, 47,
 68.1, 151, Part 5.1)
 Education Act (Sections 4(4), 74)

Insert candidate names (Surname, Given Names)

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 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

KID FOIP Coordinator 403-591-7774
 Title of the Responsible Official Business Phone Number

LOCAL JURISDICTION: Kananaskis Improvement District, PROVINCE OF ALBERTA

We, the undersigned electors of Kananaskis Improvement District, Non-commercial Residents and Ratepayers Ward, nominate
 Name of Local Jurisdiction and Ward (if applicable)

Frost Jack of
 Candidate Surname Given Names

Insert complete address and postal code

1 Boundary Road, Box 70, Kananaskis, Alberta. T0L 2H0 as a candidate at the election
 Complete Address and postal code

about to be held for the office of Councillor
 Office Nominated for

of Kananaskis Improvement District
 Name of Local Jurisdiction

Fill out this table with names, addresses and signatures of five (5) eligible voters from the Non-commercial Residents and Ratepayers Ward.

Signatures of at least 5 ELECTORS ELIGIBLE TO VOTE in this election in accordance with sections 27 and 47 of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* (if applicable). If a city or a board of trustees under the *Education Act* passes a bylaw under section 27(2) of the *Local Authorities Election Act*, then the signatures of up to 100 electors eligible to vote may be required.

Printed Name of Elector	Complete Address and Postal Code of Elector	Signature of Elector
Jiminy Cricket	1230 Boundary Rd, Box 1230, Kananaskis AB, T0L 2H0	
Elsie Ermine	Box 2653, Kananaskis Village, AB, T0L 1A1	
Peter Pan	1000 Olympic Way, Canmore, AB, T1W 1A1	
Pippa Pika	467 Lakeshore Drive, Kananaskis, AB, T0L 1B1	
Jasmine Bobolonius	6501 Mt. Kidd Close, Kananaskis, AB, T0L 1A2	

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;
- 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 sections 4(4) and 74 of the *Education Act* (if applicable) and understand their contents;
- THAT I am appointing **James Franco, 1 Franco St, Calgary, AB, T4Y 2X7, 403-555-1234, james@awesomepossum.net**
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 *Education Act* and resident in the local jurisdiction on the date of signing the nomination.

Insert candidate name (Surname, Given Names)

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.)
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SWORN (AFFIRMED) before me, Kieran Dowling

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)

Commissioner for Oaths Stamp

RETURNING OFFICER'S ACCEPTANCE

Returning Officer signals acceptance by signing this form:

Signature of Returning Officer

This section is only required if you wish to appoint an individual to be the official agent of your nomination. Otherwise, leave this section blank. Please include name, complete address and postal code, and telephone number of official agent.

This section is for OFFICE USE ONLY, during the swearing of the affidavit. Please leave this section blank.

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