

## Required Candidate Information:

Please note that the information in the table below will only be released to the City of Camrose and to the Province of Alberta for the purposes of the 2025 General Municipal Election. ***This information is required.***

LOCAL JURISDICTION:	Camrose	, PROVINCE OF ALBERTA
Calendar year of disclosure:	2025	
Full Name of Candidate:	Darrelynn Marie Fair	
Candidate's Mailing Address:	[REDACTED]	
	Camrose Alberta	, Alberta
Postal Code:	[REDACTED]	

This form, including any contributor information from line 2, is a public document.

## Campaign Revenue for Calendar Year

### CAMPAIGN CONTRIBUTIONS:

- |   |   |
|---|---|
| 1. Total amount of contributions of \$50.00 or less   | 0 |
| 2. Total amount of all contributions of \$50.01 and greater, together with the contributor's name and address (attach listing and amount) | 0 |

**NOTE:** For lines 1 and 2, include all money and valued personal property, real property or service contributions

- |  |   |
|--|---|
| 3. Deduct total amount of contributions returned | 0 |
| 4. NET CONTRIBUTIONS (line 1 + 2 - 3)            | 0 |

### OTHER SOURCES:

- |  |   |
|--|---|
| 5. Total amount contributed out of candidates own funds  | 0 |
| 6. Total net amount received from fund-raising functions | 0 |

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7. Transfer of any surplus or deficit from a candidate's previous election campaign 0
8. Total amount of other revenue 0
9. TOTAL OTHER SOURCES (add lines 5, 6, 7, and 8) 0

**TOTAL REVENUE**

10. Total campaign revenue for calendar year (add lines 4 and 9)

0

**Campaign Expenditures for Calendar Year**

11. Total paid campaign expenses 0
12. Total unpaid campaign expenses 0
13. Total campaign expenses (add lines 11 and 12) 0

The candidate must attach an itemized expense report to this form.

**Campaign Surplus (Deficit) for Calendar Year (deduct line 13 from line 10)** 0

A candidate who has incurred campaign expenses or received contributions of \$50,000 or more must attach a review engagement statement to this form.

**ATTESTATION OF CANDIDATE**

I certify that to the best of my knowledge this document and all attachments accurately reflect the information required under section 147.4 of the *Local Authorities Election Act*. Form must be printed off to sign.

Candidate Signature

Date

The personal information collected through this form is for administering the election. This collection is authorized by section 4 of the Protection of Privacy Act, specifically section 4(c) that information relates directly to and is necessary for an operating program or activity. The information is used solely for the purpose of conducting the election. The information may be included in public records, such as the City's website, or otherwise disclosed as authorized under the Protection of Privacy Act and the Access to Information Act. For questions about the collection of personal information, contact ATI Coordinator, City of Camrose, 780-678-3440, 5204 50 Avenue, Camrose, AB, T4V-0S8 or legservices@camrose.ca