

Nomination Paper and Candidate's Acceptance

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

FORM 4

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 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.

Returning Officer

Title of the Responsible Official

780 672 4426

Business Phone Number

LOCAL JURISDICTION: CITY OF CAMROSE, PROVINCE OF ALBERTA

We, the undersigned electors of CITY OF CAMROSE, nominate
Name of Local Jurisdiction and Ward (if applicable)

FRANCOEUR

Candidate Surname

DAVID R

Given Names

of

[REDACTED] as a candidate at the election
Complete Address and Postal Code

about to be held for the office of COUNCILLOR

Office Nominated for

of CITY OF CAMROSE

Name of Local Jurisdiction

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
Brian Fowler	[REDACTED]	Brian Fowler
Lish Olsen	[REDACTED]	Lish Olsen
ADAM SAGERS	[REDACTED]	[REDACTED]
Dennis Johnson	[REDACTED]	Dennis Johnson
Shauna Chrabaszcz	[REDACTED]	SKChrabaszcz

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

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

Name, Contact Information or Complete Address and Postal Code and Telephone Number of Official Agent (if applicable)
as my official agent.

- 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.

Print Name as it should appear on the ballot

FRANCOEUR

Candidate's Surname

DAVID

Given Names (may include nicknames, but not titles, i.e., Mr., Ms., Dr.)

SWORN (AFFIRMED) before me

at the CITY of CAMROSE

in the Province of Alberta,

this 5th day of September, 2025.



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

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

Brianne Hillson

From: noreply@esolutionsgroup.ca
Sent: Monday, August 25, 2025 1:27 PM
To: Elections
Subject: New Response Completed for Notice of Intent to Run

Hello,

Please note the following response to Notice of Intent to Run has been submitted at Monday August 25th 2025 1:26 PM with reference number 2025-08-25-005.

- **I am intending to run for**
Council
- **Title**
Mr.
- **Full Name**
David R. Francoeur
- **Gender**
Male
- **Full Address**
[REDACTED]
- **City**
Camrose
- **Province**
AB
- **Postal Code**
[REDACTED]
- **Phone Number (Campaign Office)**
7806725561
- **Email Address**
[REDACTED]
- **Address of place(s) where candidate records are maintained (records must be kept for a period of three years following election day)**
[REDACTED]

- **Address of place(s) where communications may be sent**
[REDACTED]
- **Name of the financial institution where campaign contributions will be deposited**
 TD Bank Camrose
- **Address of the financial institution where campaign contributions will be deposited**
 4888 50 street Camrose Alberta
- **Name(s) of signing authorities for the above depository**
 David R. Francoeur
- **Name of an additional financial institution where campaign contributions will be deposited**
 David R. Francoeur
- **Address of an additional financial institution where campaign contributions will be deposited**
 4925 - 51st Street
- **Name(s) of signing authorities for the above depository**
 David R. Francoeur
- **Name of an additional financial institution where campaign contributions will be deposited**
 NA
- **Address of an additional financial institution where campaign contributions will be deposited**
 NA
- **Name(s) of signing authorities for the above depository**
 NA
- **Date**
 8/25/2025

[This is an automated email notification -- please do not respond]

FORM 5

Returning Officer 780.672.4426
Title of the Responsible Official Business Phone Number

Candidate's Full Name David R Francœur

Candidate's Address and Postal Code [REDACTED]
[REDACTED]

Address(es) of Place(s) where Candidate Records are Maintained [REDACTED]

Name(s) and Address(es) of Financial Institutions where Campaign Contributions will be Deposited (if applicable)

NA

Name(s) of Signing Authorities for each Depository Listed Above (if applicable)

NA

Where there is any change in the above mentioned information, the candidate shall notify the local jurisdiction in writing within 48 hours of such changes by submitting a completed information form.

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