

## 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 leaservices@camrose.ca.

Camrose, AB, T4V-0S8 or <u>legservices@</u>	<u>@camrose.ca</u> .			
Returning Officer	780-672-	4426		
Title of the Responsible C	Official	Business Phone Number		
LOCAL JURISDICTION:	Camrose	, PROVINCE OF ALBERTA		
We, the undersigned elections of Na	me of Local Jurisdiction and	Ward (if applicable)		
Duane Phillis Candidate Surname		one Aubrey of Given Names		
Coumo Complete Addre	ose Alta ess and Postal Code	_ as a candidate at the election		
about to be held for the office of		ce Nominated for		
of Carrivosco				
Signatures of at least <b>5 ELECTORS ELIGIBLE TO VOTE</b> 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 P Code of Elector	ostal Signature of Elector		
Dawn Phillis		Oct pelles		
Duane Phillis				
Dylan Swere		Wille		
Wode kur		Min Han		
Brad Parsons		furthills		
		1000		



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**FALSE STATEMENT** 

#### 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 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.

Print Name as it should appear on the ballot  Candidate's Surname  Given Names (mo	Duane
Candidate's somatile Given names (ma	ay include nicknames, but not titles, i.e., Mr., Ms., Dr.)
SWORN (AFFIRMED) before me	
at the City of Camrose,	Daniston 1
in the Province of Alberta,	Candidate's Signature
signature of Returning Office 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



### Notice of Intent to Run

Local Authorities Election Act (Section 147.22) E: elections@camrose.ca P: 780.672.4426

An individual intending to run for Mayor or Council must submit this form to the Election Office before accepting campaign contributions or incurring campaign expenses as set out in **Part 5.1 Election Finances and Contributions Disclosure** of the *Local Authorities Election Act*.

#### Instructions

- 1. Complete the form below
- 2. File the completed form with the Election Office in person to City Hall, Corporate Services, 5204 50 Avenue, Camrose, AB, or by emailing it to <u>elections@camrose.ca</u>
- 3. When there are any changes to the information below, notify the Election Office in writing.

I am intending to run for:	Mayor	or	(Council	
		<i>(</i> )		
Full Name:	Duane	Aubre	y. Phillis	
Full address and postal code:			8	
Phone Number(s):	780 608 (Campaign C	4458		
	(Campaign C	Office)	(Other)	
Email Address:				
Address of place(s) where candidate records are maintained (records must be kept for a period of three years following election day):				
Address of place(s) where communications may be sent:				
Name and address of the financial institution where campaign contributions will be deposited (list additional financial institutions, if any):				
ATR		Comro	i de	
(Name of financial institu	ution)	(Addres	s of financial institution)	
Duane Phillis				
(Name(s) of	signing authorities t	for the above	depository)	



## Notice of Intent to Run

Local Authorities Election Act (Section 147.22) E: <u>elections@camrose.ca</u> P: 780.672.4426

Name and address of any additional financial institutions who be deposited (if any):	nere campaign contributions will				
(Name of financial institution)	(Address of financial institution)				
(Name(s) of signing authorities for the above depository)					
(Name of financial institution)	(Address of financial institution)				
(Name(s) of signing authorities for the abo	ove depository)				
Duand Phillis Double Signature	June 18/25 Date				

By typing your name in the signature box above, this indicates that the information entered this form is accurate.

Personal information is collected under the authority of s. 33(a) and (c) of the Freedom of Information and Protection of Privacy Act and will be used in the management and administration of the local election. This form may be disclosed as allowed or required by law. If you have any questions about the collection, use and protection of this information, please contact the FOIP Coordinator at (780) 672-4426.

# Camrose

### **Candidate Financial Information**

Local Authorities Election Act (Section 27)

FORM 5

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 section 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 person information, please contact

Permit Official

Business Phone Number

Title of the Responsible Official	Business Phone Number
Candidate's Full Name Duane Aubrey	Ph.11 is
Candidate's Address and Postal Code	
Address(es) of Place(s) where Candidate Records are Main	tained
Name(s) and Address(es) of Financial Institutions where Can Deposited (if applicable)	npaign Contributions will be
Name(s) of Signing Authorities for each Depository Listed Ab	ove (if applicable)

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.