COUNTY OF
Northern Lights

#600, 7th Ave NW, PO Box 10, Manning AB T0H 2M0
Phone 780-836-3348 Fax 780-836-3663
Toll Free 1-888-525-3481

NOTICE OF INTENT TO RUN FORM 29

Local Elections Authorities Act (section 147.22)

An individual intending to run for Councillor must submit this form to the County of Northern Lights Returning Officer, **before campaigning, accepting campaign contributions or incurring campaign expenses,** as set out in the Elections Act.

INSTRUCTIONS

1. Complete this form.
2. Submit the completed form to the Returning Officer in person at the County Office Building located at 600-7th Ave NW Manning, Alberta, or by email at: ea@countynl.ca
3. Once received, your name will be added to the registry list and made publicly available on the County's website.
4. If there are changes to the information provided on this form, notify the Returning Officer immediately in writing, either by email or mail: PO Box 10 Manning, AB T0H 2M0

CANDIDATE INFORMATION

I am intending to run in the 2027 Municipal By-Election for Councillor in the following Ward:

[X] WARD 4 Deadwood/Sunny Valley

Last Name, First Name: _____

Rural Address: _____

Address for Mailing Communications: _____

_____

Home Phone: _____

Cell Phone: _____

Email: _____

Address of Places(s) where Candidate Records are stored/maintained: _____

_____

Name and Address of Financial Institution to be used as depositories for campaign contributions: _____

_____

Name(s) of signing authority for each of the depositories: _____

_____

DECLARATION

I hereby declare my intention to run as a Candidate in the 2027 Municipal By-Election for the office of Councillor in the County of Northern Lights.

I acknowledge that submission of the 'Notice of Intent to Run' form does not exempt me from completing the required nomination forms with the minimum number of nominations (FIVE).

Signing my name to this form indicates that the information I have entered is accurate and there is an understanding of my intent to run in the election.

SWORN (AFFIRMED) before me at the

_____ of _____, in the Province

of Alberta, this _____ day of

_____ , 202__. **_____**

Signature of Candidate

_____

Signature of Returning Officer or Commissioner of Oaths or Notary Public in and for Alberta

Commissioner for Oaths Stamp

RETURNING OFFICER'S ACCEPTANCE of FORM

_____ **_____**

Signature of Returning Officer or Substitute **Date Received**

The personal information on this form is being collected to support administrative requirements of the local authorities election process and is authorized under sections 147.22 of the Local Authorities Election Act and section 33© of the Freedom of Information and Protection of Privacy Act. The personal information will be managed in compliance to the mention sections. Questions and or concerns regarding the collection, management and destruction of this information can be directed to the ATI & Privacy Officer at the County of Northern Lights. (780.836.3348 or ea@countynl.ca)