

An individual intending to run for Mayor or Councillor must submit this form to the Returning Officer 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 Returning Officer in person.
3. Notify the Returning Officer in writing if the information below changes.

I am intending to run in the 2025 general municipal election for:	<input type="checkbox"/> Mayor <input type="checkbox"/> Councillor	For Councillor, select division:	<input type="checkbox"/> Division 1 <input type="checkbox"/> Division 2 <input type="checkbox"/> Division 3	<input type="checkbox"/> Division 4 <input type="checkbox"/> Division 5 <input type="checkbox"/> Division 6
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Full name: _____

Full address and postal code: _____
(Other)Phone number(s): _____
(Campaign office) (Other)

Email address: _____

Address of place(s) where candidate records are maintained (records must be kept for 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 on page 2, if any):

(Name of financial institution) (Address of financial institution)_____
(Name(s) of signing authorities for the above depository)_____
Name Signature Date

By signing this form, you are confirming that the information provided on 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 or disclosure of this information, please contact the Access and Privacy Advisor, 780-939-4321, or FOIP@sturgeoncounty.ca.

Name and address of additional financial institutions where campaign contributions will be deposited (if any):

(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 above depository)