

Appendix C

FORM I (FRONT)

[Clauses 67(3)(a),(b),(c),(d),(g) & (h) and subsections 67(3), (4) & (5) of the Act]
[Subsection 37(1) of the Regulations]

Nomination

We the undersigned, being voters of the:

_____ of _____
(Municipality)

Division No. _____ (If applicable)

nominate _____, _____,
(Name)

of _____, to be a candidate at the election
(Street/road address or legal description of land)

to be held on the _____ day of _____, 20 _____ for the office of:

(Complete one)

Reeve: _____ of _____
(Municipality)

Councillor: _____ of _____
(Municipality)

Division No. _____

Signature *	Name (printed)	Street/Road Address or Legal Description of Land
_____	_____	_____
_____	_____	_____
_____	_____	_____

* require at least

- 2 signatures for Rural Municipalities.

FORM I (BACK)

[Clauses 67(3)(a)(b)(c)(d)(g) & (h) of the Act]

[Subsection 37(1) of the Regulations]

Candidate's Acceptance I, _____,
(Name as it will appear on the ballot)

a(n) _____,
(Occupation)*

a candidate nominated for the office of: (complete as applicable)

Reeve: _____ of _____
(Municipality)

Councillor: _____ of _____
(Municipality)

Division No. _____

declare that:

1. I am the full age of 18 years or will attain the full age of 18 years on or before election day;
2. I am a Canadian citizen;
3. If elected, I will accept the office for which I was nominated; and
4. I am not disqualified by *The Local Government Election Act, 2015* or any other Act from holding the office for which I am a candidate;

For Rural Municipalities

5 I am eligible to vote;

6 I am a resident of Saskatchewan

Dated at _____, this _____ day of _____, 20 _____.

(Signature of Candidate)

(Witness)

(Witness)

FORM B.1
[Clause 6.1(1)(a)]

RESULTS OF CRIMINAL RECORD CHECK FOR CANDIDATE FOR ELECTION			
NAME OF CANDIDATE: _____			
Last Name	Given Name	Middle Name	
PREVIOUS NAME and/or ANY OTHER NAMES USED: _____			
ADDRESS: _____			
Apt.#	Street/Avenue		
City/Town	Province/Postal Code	Telephone Number	
DATE OF BIRTH: _____		PLACE OF BIRTH: _____	
Year/Month/Day			
GENDER: Male / Female			
MUNICIPALITY: _____ of _____			
(town, northern village, northern hamlet)		(name of municipality)	
NAME OF LOCAL POLICE SERVICE THAT CONDUCTED CHECK: _____			
CRIMINAL RECORD CHECK ATTACHED: Yes / No			
<i>Note: The criminal record check from the local police service must be attached to this form to be acceptable for submission with the nomination paper and must have been completed not more than 30 days before the date of submission.</i>			
STATEMENT OF CONSENT:			
<i>I consented to a search of all records available at the time the search was conducted, including charges before the courts (including active alternative measures, stays of proceedings entered within one year of this request and findings of unfit to stand trial), findings of guilt or convictions (including youth records accessible under subsection 119(2) of the Youth Criminal Justice Act) and court orders (including peace bonds, restraining orders and recognizances under sections 810.01, 810.1 or 810.2 of the Criminal Code) registered in my name in the National Repository and local records available to the police service. I understand that if a possible record existed, it would not be disclosed until identification was confirmed by either myself or by fingerprints. I also understand that apprehensions, orders or other records relating to The Mental Health Services Act or The Youth Drug Detoxification and Stabilization Act were not disclosed.</i>			
<i>I understand criminal record checks submitted pursuant to section 89.1 of The Municipalities Act:</i>			
<ul style="list-style-type: none"> • are not considered to be for a volunteer position; • are not considered to be for a position with the vulnerable sector; • do not require fingerprint verification for the sake of submission with the nomination paper and it was my option to submit a fingerprint verification to confirm my identity and record or lack of a record; • do not require a release of information to a third party because I received the results personally; and • are not required to include copies of the records themselves. 			
Dated this ____ day of _____ 20 ____ . Signature: _____			

**RURAL MUNICIPALITY OF DUNDURN NO. 314
PUBLIC DISCLOSURE STATEMENT
Form 1**

Name: _____

Address: _____

Disclosure of Employer, etc.:

Pursuant to (subclause 116(2)(a)(i) of *The Cities Act*/subclause 142(2)(a)(i) of *The Municipalities Act*/subclause 160(2)(a)(i) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of every employer, person, corporation, organization, association, or other body from which I or someone in my family receives remuneration for services performed as an employee, director, manager, operator, contractor, or agent:

My Name or Name of Family Member	Payer	Nature of Relationship

Disclosure of Corporate Interests:

Pursuant to (subclause 116(2)(a)(ii) of *The Cities Act*/subclause 142(2)(a)(ii) of *The Municipalities Act*/subclause 160(2)(a)(ii) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of each corporation in which I or someone in my family has a controlling interest, or of which I or someone in my family is a director or a senior officer:

My Name or Name of Family Member	Name of Corporation

Disclosure of Partnerships:

Pursuant to (subclause 116(2)(a)(iii) of *The Cities Act*/subclause 142(2)(a)(iii) of *The Municipalities Act*/subclause 160(2)(a)(iii) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of each partnership or firm of which I or someone in my family is a member:

My Name or Name of Family Member	Name of Partnership or Firm

Note:

1. This form must be accompany nomination forms as per Section 67(6) of *The Local Government Election Act, 2015*.
2. This form, when completed, is a public document.
3. The administrator will make amendments to this disclosure in accordance with subsequent declarations filed by the member.
4. The administrator will note the date on which this statement is amended.

Disclosure of Business Arrangements:

Pursuant to (subclause 116(2)(a)(iv) of *The Cities Act*/subclause 142(2)(a)(iv) of *The Municipalities Act*/ subclause 160(2)(a)(iv) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of any corporation, enterprise, firm, partnership, organization, association, or body that I or someone in my family directs, manages, operates or is otherwise involved in that:

- (a) transacts business with the municipality;
- (b) the council considers appropriate or necessary to disclose²; or
- (c) is prescribed:

My Name or Name of Family Member	Name of Corporation, Enterprise, Firm, Partnership, Organization, Association, or Body

Disclosure of Property Holdings:

Pursuant to (clause 116(2)(b) of *The Cities Act*/clause 142(2)(b) of *The Municipalities Act*/ clause 160(2)(b) of *The Northern Municipalities Act, 2010*), I hereby disclose the municipal address or legal description of any property located in the municipality or an adjoining municipality that is owned by:

- (i) me or someone in my family; or
- (ii) a corporation, incorporated or continued pursuant to *The Business Corporations Act* or the *Canada Corporations Act*, of which I or someone in my family is a director or senior officer or in which I or someone in my family has a controlling interest:

Owner(s)	Municipal Address or Legal Description	Municipality

Disclosure of Contracts and Agreements:

Pursuant to (clause 116(2)(c) of *The Cities Act*/clause 142(2)(c) of *The Municipalities Act*/ clause 160(2)(c) of *The Northern Municipalities Act, 2010*), I hereby disclose the general nature and any material details of any contract or agreement involving me or someone in my family that could reasonably be perceived to be affected by a decision, recommendation or action of the council and to affect my impartiality in the exercise of my office:

My Name or Name of Family Member	General Nature and Any Material Details of Any Contract or Agreement

² Described in a municipal policy or bylaw

DECLARATION

I, _____, of the _____,
[FULL NAME OF MUNICIPALITY]

in the Province of Saskatchewan, do hereby declare that to the best of my knowledge, information and belief, the statements and allegations contained and made in this form are true and complete, and I make this declaration for the purpose of official registration, in the full knowledge that it will be available for public examination.

Dated this ____ day of _____, 20____.

Witness

Signature of Declarant

Date Received: _____