FORM 4

# **Nomination Paper and Candidate's Acceptance**

Local Authorities Election Act (Sections 12, 21, 22, 23, 23.1, 27, 28, 47, 68.1, 151, 158.3, Part 5.1) Education Act (Sections 4(4), 74)

403-230-1401

The personal information collected through this form is for administering the election. This collection is authorized by section 33(c) of the Freedom of Information and Protection of Privacy Act For Auestions about the collection of personal information, contact INTERGOVERNMENTAL SERVICES

262075 Rocky View Point  Address  LOCAL JURISDICTION:  Rocky View County  Rocky View County  Rocky View County, P  Rocky View County, Division 2  Name of Local Jurisdiction and Ward (if applicable)  David Clark  Candidate's Surname and Given Names  Complete Address and Postal Code  as a candidate at the election about to be held for the office of  Office Nominated for		T4A 0X2  Postal Code  OF ALBERTA  of
Address  City or Town  Rocky View County  P  We, the undersigned electors of  Rocky View County, Division 2  Name of Local Jurisdiction and Ward (if applicable)  Name of Local Jurisdiction and Ward (if applicable)  David Clark  Candidate's Surname and Given Names  Complete Address and Postal Code  as a candidate at the election about to be held for the office of  Office Nominated for  Rocky View County	Province	Postal Code OF ALBERTA
LOCAL JURISDICTION:  Rocky View County  Rocky View County, Division 2  Name of Local Jurisdiction and Ward (if applicable)  Nominate  David Clark  Candidate's Surname and Given Names  Complete Address and Postal Code  as a candidate at the election about to be held for the office of  Office Nominated for  Rocky View County	ROVINCE	OF ALBERTA
We, the undersigned electors of Rocky View County, Division 2  Name of Local Jurisdiction and Ward (if applicable)  David Clark  Candidate's Surname and Given Names  Complete Address and Postal Code  as a candidate at the election about to be held for the office of  Office Nominated for Rocky View County		,
Name of Local Jurisdiction and Ward (if applicable)  David Clark  Candidate's Surname and Given Names  Complete Address and Postal Code  as a candidate at the election about to be held for the office of  Office Nominated for  Rocky View County	n 2	of
nominate  Candidate's Surname and Given Names  Complete Address and Postal Code  as a candidate at the election about to be held for the office of  Office Nominated for  Rocky View County	n 2	of
Candidate's Surname and Given Names  Complete Address and Postal Code  as a candidate at the election about to be held for the office of  Office Nominated for  Rocky View County	n 2	of
Complete Address and Postal Code  as a candidate at the election about to be held for the office of  Office Nominated for  Rocky View County	n 2	
as a candidate at the election about to be held for the office of  Councilor, Division  Office Nominated for  Rocky View County	n 2	
as a candidate at the election about to be held for the office of  Councilor, Division  Office Nominated for Rocky View County	n 2	
Office Nominated for Rocky View County		
Provide signatures of at least 5 ELECTORS ELIGIBLE TO VOTE in this election in accordance with sections Authorities Election Act and sections 4(4) and 74 of the Education Act (if applicable). If a city or a board of trust Education Act passes a bylaw under section 27(2) of the Local Authorities Election Act, then the signatures of eligible to vote may be required.	stees unde	er the
Printed Name of Elector Complete Address and Postal Code of Elector S	Signature	of Elector
ALLEN CLAYTON	laa	4
CHRISTINE TROTTIER	The	The
KEN HISTZ	Kyn	Kife
Rehecca Leonard	741	april 1
RebeccaLeonard	roll	undf
	1	ē

#### 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,

I am not otherwise disqualified under section 22, 23 or 23.1 of the Local Authorities Election Act,

I will accept the office if elected,

I have read sections 12, 21, 22, 23, 23.1, 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,

I am appointing

Name, Contact Information or Complete Address and Postal Code, and Telephone Number of Official Agent

as my official agent (if applicable),

I have provided a criminal record check with my nomination package (if applicable),

I will read and abide by the municipality's code of conduct if elected (if applicable), and

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.)

Clark

Candidate's Surname

David

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

SWORN (AFFIRMED) before me

at the anty of

of Kocky view

in the Province of Alberta,

this

day of

ignature of Returning Officer or Commissioner for Oaths

Commissionar for Oaths Stamu

Candidate

TYLER ANDREASEN

A Commissioner for Oaths In and for Alberta

My Commission Expires April 11, 20

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

RETURNING OFFICER'S ACCEPTANCE

Returning Officer signals acceptance by signing this form:

Signature of Returning Officer

#### FORM 5

SEP 19 2025

### **Candidate Financial Information**

Local Authorities Election Act (Section 27)

The personal information collected through this form is for administering the election. This collection is authorized by section 33(c) of the Freedom of Information and Protection of Privacy Act. For questions about the collection of personal information, contact

LEGISLATIVE AND

INTERGOVERNMENTAL.

Returning Officer SERVICES		403-230-1401	
Business Title/Organization		Business	Phone Number
262075 Rocky View Point	Rocky View County	AB	T4A 0X2
Address	City or Town	Province	Postal Code
Candidate's Full Name	David Clark		
Candidate's Address and Postal Code			
Address(es) of Place(s) where Candidate Rec	cords are Maintained		
Name(s) and Address(es) of Financial Institut BMO101 (	ions where Campaign Contributions wil Crowfoot Wy NW Calgary AB T3G 2R		pplicable)
Name(s) of Signing Authorities for each Depo	sitory Listed Above (if applicable)  David Clark		

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.

RECEIVED	Notice of Intent  Local Authorities Election Act (Section 147.22)
LOCAL JURISDICTION: SEP 19/2025 KY VI W	COUNTY , PROVINCE OF ALBERTA
Election Date: OCT 20 2025  LEGISLATE AND INTERGOVERNMENTAL	
I,SERVICES CALK	, of
intend to be nominated, or have been nominated, to run for election as a name of local jurisdiction and	ROCKYVIEW COUNTY
I understand that by completing this form, I am declaring my intent to be Act, which carries with it certain obligations and responsibilities.	come a candidate as defined in the Local Authorities Election
Candidate Information	
Title Candidate Last Name  CLORK	Candidate First Name
Gender Telephone Number Email Address	
Address of place(s) where candidate records are maintained:	
Name(s) and address(es) of financial institutions where campaign contri	
BMO 101 CROWFOOT WA	NW CALGARY, AB 736, 2M
Name(s) of signing authorities for each depository listed above (if applic	able):
RAVID CLARKE.	
SWORN (AFFIRMED) before me at the	
of Rocky Veyn the Province of Alberta, this 19	Λ
day of September, 20 ZS	11000
	Signature of Candidate
Signature of Returning Officer or Commissioner for Oaths or Notary Public in and for Alberta	v Signature of Cartuidate
Commissioner for Oaths Stamp	RETURNING OFFICER'S ACCEPTANCE Returning office signals acceptance by signing this form
TYLER ANDREASEN A Commissioner for Oaths In and for Alberta My Commission Expires April 11, 20_2_6	

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

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Signature of Returning Officer



Important Notices



Protected B once completed

PIB CMP PPU 030

PIB CMP PPU 005

Release of Results of Criminal Record Check

Reference Number

This information does not constitute a Certified Criminal Record by the	e RCMP.	EGISLATIVE AND ERGOVERNMENTAL	
A Certified Criminal Record can only be issued based on the submiss	sion of fingerprints to the RCM	R National Repository of Criminal Records.	
• This information may not contain all criminal record convictions, or co Youth Criminal Justice Act.	nvictions and records related	to "young persons" pursuant to the	
Motor vehicle records not checked; consult provincial/territorial minist	ries for driver's abstract.		
Applicant Information		医指挥室组织系统控制系统公	
Current Legal Surname (required)	Current Legal Given Names (required)		
CLARK	DAVID Heilst		
Gender	Date of Birth (www.mm-dd: r	required)	
Current Address (required)	City (required)	Province Postal Code (A9A 9A9; required)	
Criminal Record Check Results		HUNDLES OF THE STATE OF THE STA	
Note: This is not an affirmation of good character			
Negative: Based solely on the name and date of birth provided by tidentify any records with the name and date of birth of the applicant were also searched. Positive identification that a criminal record document of confirmed by fingerprint comparison. Delays do exist between a cornection of Criminal Records. Not all offences are reported to the	. All available police records mes or does not exist at the RCI nviction being rendered in cour	nanagement systems and court records, where applicable MP National Repository of Criminal Records can only be rt, and the details being accessible on the RCMP National	
Incomplete: Based solely on the name and date of birth provided be completed. All available police records management systems an criminal record does or does not exist requires the applicant to subrollice service or accredited private fingerprinting company. Delays the RCMP National Repository of Criminal Records. Not all offences	id court records, where applica mit fingerprints to the RCMP N do exist between a conviction s are reported to the RCMP Na	able were also searched. Positive identification that a ational Repository of Criminal Records by an authorized being rendered in court, and the details being accessible on ational Repository of Criminal Records.	
Possible Match: Based solely on the name and date of birth provious resulted in a possible match to a registered criminal record. All avait searched. Positive identification that a criminal record does or does fingerprint comparison. As such, the criminal record information decord Delays do exist between a conviction being rendered in court, and to offences are reported to the RCMP National Repository of Criminal	lable police records managem not exist at the RCMP National clared by the applicant does not the details being accessible on Records.	ent systems and court records, where applicable were also al Repository of Criminal Records can only be confirmed by ot constitute a Certified Criminal Record by the RCMP.  I the RCMP National Repository of Criminal Records. Not all	
Local Conviction not Added to National Repository of Criminal information declared by the applicant, there was a criminal conviction Suspension (Pardon) was granted. Delays do exist between a convict of Criminal Records.	Records: Based solely on the on registered on the date <b>belo</b> e iction rendered in court and the	w, but not a sex offender record where a Record e details being accessible on the RCMP National Repository	
If "Local Conviction not Added to National Repository of Criminal Recon (yyyy-mm-dd)	ds" was selected, please provi	ide the date the criminal conviction was registered on.	
Additional Comments (this field expands)			
Received by		Committee of the Commit	
	IIS No.	Detachment Stamp or Seal	
S.THOMPSON HRMIS 000146962		Cochrane RCMP Oi/c	
1	(dd)	12 Clydesdale Avenue	
	(yyyy-mm-dd) SEP 1 7 2025	Cochrane, AB T4C 2Y6	