FORM 26

LEGISLATIVE AND SERVICES

SEP 19 2025

Campaign Disclosure Statement and Financial Statement

Local Authorities Election Act (Sections 147.3, 147.4)

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

Returning Officer Booky View county Business Title/Organization		403-2	403-230-1401 Business Phone Number	
		Business F		
262075 Rocky View Point	Rocky View County	AB	T4A 0X2	
Address	City or Town	Province	Postal Code	
LOCAL JURISDICTION:		, PRO	OVINCE OF ALBERTA	
Calendar year of disclosure: 2024				
Full Name of Candidate:	Newton 5	cott		
Candidate's Mailing Address:				
			, Alberta	
This form, including any contributor inform				
	Campaign Revenue for Calendar Yea	r		
CAMPAIGN CONTRIBUTIONS:				
1. Total amount of contributions of \$50.00 or		-		
2. Total amount of all contributions of \$50.01 and address (attach listing and amount)	and greater, together with the contributor's r	name 		
NOTE: For lines 1 and 2, include all money at	nd valued personal property, real property of	r service contributions		
3. Deduct total amount of contributions return	ed			
4. NET CONTRIBUTIONS (line 1 + 2 - 3)			\$0.00	
OTHER SOURCES:				
5. Total amount contributed out of candidate's	s own funds	· · · · · · · · · · · · · · · · · · ·		
6. Total net amount received from fund-raisin	g functions	-		
7. Transfer of any surplus or deficit from a ca	ndidate's previous election campaign			
8. Total amount of other revenue				
9. TOTAL OTHER SOURCES (add lines 5, 6, 7 and 8)			\$0.00	
TOTAL REVENUE				
10. Total campaign revenue for calendar yea	(add lines 4 and 9)		\$0.00	
Са	mpaign Expenditures for Calendar Y	ear		
11. Total paid campaign expenses			· · · · · · · · · · · · · · · · · · ·	
12. Total unpaid campaign expenses				
13. Total campaign expenses (add lines 11 and 12)			\$0.00	
The candidate must attach an itemized	expense report to this form.			
Campaign Surplus (Deficit) for Calendar Year (deduct line 13 from line 10)			\$0.00	

ATTESTATION OF CANDIDATE

I certify that to the best of my knowledge this document and all attachments accurately reflect the information required under section 147.4 of the Local Authorities Election Act.

Date yyyy-mm-dd

Signature of Candidate

Forward the signed original of this document to the address of the local jurisdiction in which the candidate was nominated for election.

IT IS AN OFFENCE TO FILE A FALSE STATEMENT