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)

LEGISLATIVE AND
The personal information retirement 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

| Information and Protection of Privacy Act. For quest | ions about the collection of personal information, contact | y section so(c) of the Production |
|--|---|--|
| Returning Officer Business Title/Organization | | 403 - 520 - 8197 Business Phone Number |
| 262075 Rocky View | Birt Rocky View County | Province TOAOX2 |
| LOCAL JURISDICTION: Roca | KY VIEW COUNTY | , PROVINCE OF ALBERTA |
| We, the undersigned electors of | OCKY VIEW COUNTY Name of Local Jurisdiction and Ward (if applica | DIVESION 4 |
| nominate Roc | DUTTON SPENCE Candidate's Surname and Given Names | |
| | Sandicate's Curraine and Given Names | |
| as a candidate at the election about to be held | for the office of COUNCILLOR Office Nomina | DIVISION 4 |
| of ROCKY | VIEW COUNTY Name of Local Jurisdiction | |
| The candidate's local political party or slate is | N/A | (if applicable). |
| Authorities Election Act and sections 4(4) and | LIGIBLE TO VOTE in this election in accordance with service of the Education Act (if applicable). If a city or a board (2) of the Local Authorities Election Act, then the signat | d of trustees under the |
| Printed Name of Elector | Complete Address and Postal Code of Elector | Signature of Elector |
| Robert Lee | | Star |
| SusanBrown | | (In grown |
| ALAN BISHOP | | 7 Bel |
| Alyssa Guilther | | 3 |
| Stanley Church | | Alle |
| | | |

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,

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

I will accept the office if elected,

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.)

SPENCE

Candidate's Surname

Candidate's Given Names

(may include nicknames, but not titles, i.e. Mr., Ms, Dr.)

SWORN (AFFIRMED) before me

at the County

of Kacky

enature of Returning Officer or

Commissioner for Oaths

1 View

in the Province of Alberta,

_ day of

, 20 <u>(</u>

Signature of Candidate

Commissioner for Oaths Stamp

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



Candidate Financial Information

Local Authorities Election Act (Section 27)

LEGISLATIVE AND The personal information and Protection of Privacy Act. For questions about the collection of personal information, contact (43)520-8197 Business Title/Organization De Durra Candidate's Full Name Candidate's Address and Postal Code Address(es) of Place(s) where Candidate Records are Maintained Name(s) and Address(es) of Financial Institutions where Campaign Contributions will be Deposited (if applicable) Name(s) of Signing Authorities for each Depository Listed Above (if applicable)

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.

| CKI VIEW COU | |
|--|---|
| KENCINED 3 | Notice of Intent |
| AUG 0 5 2025 | Local Authorities Election Act (Section 147.22) |
| LOCAL JURISDICTION: A DEKY VIEW | PROVINCE OF ALBERTA |
| Election Date: EGISI CAGA TOR 20, 2025 INTERGUERMENTAL date | |
| 1, ACT SAFAICE | , of |
| | |
| | |
| intend to be nominated, or have been nominated, to run for election as a | |
| ROCKY VIEW COUNT | ward, if applicable |
| I understand that by completing this form, I am declaring my intent to be | |
| Act, which carries with it certain obligations and responsibilities. | |
| Candidate Information | |
| Title Candidate Last Name | Candidate First Name |
| MR. SPENCE | Roc |
| Gender Telephone Number Email Address | |
| | |
| Address of place(s) where candidate records are maintained: | |
| | |
| | |
| Name(s) and address(es) of financial institutions where campaign contrib | outions will be deposited (if applicable): |
| KOYAL BANK CROWFORT B | CALLARY AB 2R2 |
| Name(s) of signing authorities for each depository listed above (if application) | able): 73 & 2R2 |
| ROC SPENCE | 4 |
| SWORN (AFFIRMED) before me at the | |
| of Rocky View, in the Province of Alberta, this | |
| Λ' | 4 |
| day of Hugust, 20 25 | . 1 |
| | |
| Signature of Returning Officer or Commissioner for Oaths or Notary Public in | Signature of Candidate |
| and for Alberta | |
| Commissioner for Oaths Stamp | RETURNING OFFICER'S ACCEPTANCE Returning office signals acceptance by signing this form |
| 3 | State and doopparied by organing the lotting |
| TYLER ANDREASEN A Commissioner for Oaths | |
| In and for Alberta | |
| My Commission Expires April 11, 20_26 | |
| | Signature of Returning Officer |

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Important Notices

RECEIVED AND DE COOL

Protected B once completed

PIB CMP PPU 030

IB CMP PPU 005

Release of Results of Criminal Record Check

Reference Number

| • This information does not constitute a Certified Criminal Record by th | e RCMP. | SERVICES | | |
|--|------------------------------|---|--|--|
| A Certified Criminal Record can only be issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records. | | | | |
| This information may not contain all criminal record convictions, or convictions and records related to "young persons" pursuant to the Youth Criminal Justice Act. | | | | |
| Motor vehicle records not checked; consult provincial/territorial ministration. | ries for driver's abstract. | | | |
| Applicant Information | | | | |
| Current Legal Surname (required) | Current Legal Given Name | s (required) | | |
| SPENCE | Roc | DUTTON | | |
| Gender | Date of Birth (vvvv-mm-dd; | required) | | |
| Current Address (required) | City (required) | Province Postal Code (A9A 9A9; required) | | |
| Criminal Record Check Results | | SHE STORY SHEET AND SHEET SHEET | | |
| Note: This is not an affirmation of good character | | | | |
| Negative: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records did not identify any records with the name and date of birth of the applicant. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by fingerprint comparison. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. | | | | |
| Incomplete: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records could not be completed. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist requires the applicant to submit fingerprints to the RCMP National Repository of Criminal Records by an authorized police service or accredited private fingerprinting company. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. | | | | |
| Possible Match: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records has resulted in a possible match to a registered criminal record. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by fingerprint comparison. As such, the criminal record information declared by the applicant does not constitute a Certified Criminal Record by the RCMP. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records. | | | | |
| 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. | registered on the date belo | w, but not a sex offender record where a Record | | |
| If "Local Conviction not Added to National Repository of Criminal Record (yyyy-mm-dd) | s" was selected, please prov | ide the date the criminal conviction was registered on. | | |
| Additional Comments (this field expands) | | | | |
| Received by | | | | |
| Employee Name HRMI | S No. | Detachment Stamp or Seal | | |
| S.THOMPSON HRMIS 000146962 | | | | |
| 0 | | Cochrane RCMP Oi/c | | |
| Signature Date (| yyyy-mm-dd) | 12 Clydesdale Avenue | | |
| 1 de la | JUL 2 3 2025 | Cochrane, AB T4C 2Y6 | | |