

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

We the undersigned, being voters of the:

<b>Town of Tisdale</b>
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to be held on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_ for the office of:  
(Complete one)

Mayor/Reeve: \_\_\_\_\_ of \_\_\_\_\_  
(Municipality)

**Councillor:** \_\_\_\_\_ of \_\_\_\_\_  
(Municipality)

[illegible]

- 25 signatures for a municipality with a population of 20,000 or more (except for Rural Municipalities);
- 5 signatures for a municipality with a population of less than 20,000 (except for Rural Municipalities); or
- 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)*

**Mayor/Reeve:** \_\_\_\_\_ of \_\_\_\_\_  
*(Municipality)*

**Councillor:** \_\_\_\_\_ of \_\_\_\_\_  
*(Municipality)*

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 municipalities – excluding rural municipalities and resort villages**

- ☐ **5** I have resided in Saskatchewan for at least six consecutive months immediately preceding the date on which this nomination paper is submitted; and
- ☐ **6** I have resided in the municipality, or on land now in the municipality, for at least three consecutive months immediately preceding the date on which this nomination paper is submitted.

**Candidate's preferred contact information**

*(Candidates must provide at least one of the following)*

Home Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Other Contact Information: \_\_\_\_\_

Dated at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
*(Signature of Candidate)*

\_\_\_\_\_  
*(Witness)*

\_\_\_\_\_  
*(Witness)*

*\*Can be removed from the form, unless otherwise required by bylaw of the municipality pursuant to clause 9.1(2)(c) of the Act.*