

LOCAL JURISDICTION:	The City of Spruce Grove, Province of Alberta
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ELECTION DATE:

Monday, October 20, 2025

We, the undersigned electors of the City of Spruce Grove, Province of Alberta nominate:

of					
(Candidate's Surname)	(Candidate's Given Names)	(Complete Address, S	Street Address or Legal Land Description, and Postal code)		
as a candidate at the election about to be held for the office of					
	Grove, Province of Alberta.		(identify office of Mayor or Councillor)		

Signatures of at least **25 ELECTORS ELIGIBLE TO VOTE** in this election in accordance with sections 27 and 47 of the *Local Authorities Election Act*.

Printed Name of Elector	Electors Complete Address and Postal Code (Street Address or Legal Land Description)	Signature of Elector
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		



Candidate's Surname

Candidate's Given Names

Printed Name of Elector	Electors Complete Address and Postal Code (Street Address or Legal Land Description)	Signature of Elector
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		
21.		
22.		
23.		
24.		
25.		

Supplementary signatures may be collected and documented on the supplementary sheet provided.



Candidate's Surname

Candidate's Given Names

Candidate's Acceptance

I, the above named candidate, solemnly swear (affirm)

- THAT I am eligible under sections 21 and 47 of the Local Authorities Election Act to be elected to the office;
- THAT I am not otherwise disqualified under section 22 or 23 of the Local Authorities Election Act;
- THAT I will accept the office if elected;
- THAT I have read sections 21, 22, 23, 27, 28, 47, 68.1 and 151 and Part 5.1 of the *Local Authorities Election Act* and understand their contents;
- THAT I am appointing as my official agent (if applicable):

(Name, Contact Information or Address and Postal Code and Telephone Number of Official Agent) (if applicable)

- THAT I will read and abide by municipality's code of conduct if elected; and
- THAT the electors who have signed this nomination paper are eligible to vote in accordance with the *Local Authorities Election Act* and *Education Act* and resident in the local jurisdiction on the date of signing the nomination.

PRINT NAME AS IT SHOULD	APPEAR ON THE BALLOT:	
Candidate's Surname	Given Names (may include nic	knames, but not titles, i.e. Mr., Mrs., Dr.)
SWORN (AFFIRMED of Province of Alberta th 2025.	0) BEFORE ME at thein thein the	Candidate's Signature

Signature of Returning Officer or Commissioner for Oaths

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



Candidate's Surname

Candidate's Given Names

RETURNING OFFICER'S ACCEPTANCE

Returning Officer signals acceptance by signing this form:

Signature of Returning Officer



Supplementary Signatures

Candidate's Surname, Candidate'		e's Given Names	
Printed Name of Elector	Complete Address (Street Address or Legal Land Description) and Postal Code of Residence of Elector	Signature of Elector	

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