

Statement of Scrutineer or Official Agent

Local Authorities Election Act
(Sections 16(2), 68.1, 69, 70)

Note: The personal information on this form is being collected to support the administrative requirements of the local authorities election process and is authorized under section 16(2), 68.1, 69 and 70 of the Local Authorities Election Act. The personal information will be managed in compliance with the privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions concerning the collection of this personal information, please contact

(Title of the Responsible Official) (Business Phone Number)

LOCAL JURISDICTION: , PROVINCE OF ALBERTA

ELECTION DATE (OR VOTE ON A BYLAW OR QUESTION):

I, (Name of Scrutineer or Official Agent)

of (Complete address and postal code)

in the Province of , am at least 18 years of age and,

(a) For the purposes of an election, will act as scrutineer on behalf of (Name of Candidate) for the office of (Office for which Candidate was Nominated)

OR

(b) For the purposes of a vote on a bylaw, will act as scrutineer for those persons who are interested in

(Check [x] One) [ ] promoting the passing of Bylaw No.

[ ] opposing the passing of Bylaw No.

OR

(c) For the purposes of a vote on a question, will act as scrutineer on behalf of those persons who are interested in

(Check [x] One) [ ] voting in the positive on the question set out.

[ ] voting in the negative on the question set out.

AND I will in all respects maintain and aid in maintaining the absolute secrecy of the vote.

(Signature of Scrutineer or Official Agent)

IT IS AN OFFENCE TO SIGN A FALSE STATEMENT