



Hinton Municipal Election Forms: Instructions for Completion

Welcome to the Town of Hinton's Municipal Election!

This document provides important instructions on how to complete your election forms. Please read these instructions carefully to ensure your forms are filled out correctly.

Election Bylaw 2006 requires every candidate to submit a criminal record check with their completed nomination package.

Notice of Intent (Form 29)

Purpose: Section 147.22 of the LAEA requires an individual who intends to be nominated or has been nominated to run for election in a local jurisdiction as a candidate to give written notice to the local jurisdiction before accepting a campaign contribution or incurring a campaign expense.

Before prospective candidates submit a notice of intent, they should review the eligibility criteria in the [Local Authorities Election Act](#). All potential candidates are encouraged to read through the election and candidate information on the Town's website at Hinton.ca and the [Alberta Municipal Affairs Election](#) website, both of which are being updated as information becomes available.

Nomination Form (Form 4)

Purpose: This form is used by individuals running for municipal office to officially enter the election.

Instructions:

- Fill in your name, address, and contact information.
- Indicate the position you are running for (e.g., Mayor, Councillor).
- Gather the required signatures from eligible voters within the municipality minimum of 5.
- Submit the form to the municipal election office before the deadline.

Important Tips:

Make sure that the nominators' signatures are valid and from eligible voters in your municipality.

The candidate must sign the form before submission.

Candidate Financial Information (Form 5)

Purpose: This form collects financial and banking information of candidates. It must be submitted on or before nomination day.

Instructions:

- Fill in full name and address
- Fill in address of where candidates records are maintained
- If the candidate has opened a bank account for campaign contributions, the name and address of the financial institution must be provided as well as the names of signing authorities.

Important Tip:

If any of the information on this form changes, the candidate must provide notification in writing within 48 hours.

Enumerator, Candidate or Official Agent Proof of Identification for Section 52 Access (Form 11)

Purpose: provides for proof of identification of an enumerator, candidate or official agent.

Instructions:

- Fill in the applicants name and address
- Indicate the office they represent
- Submit the form to the Returning Officer

Important Tip:

An enumerator, candidate or official agent must have this form available while conducting campaign business.

Campaign Worker Proof of Identification (Form 12)

Purpose: provides for proof of identification of a campaign worker. The form is for use by the candidate and a campaign worker and not provided to the returning officer.

Instructions:

- The upper portion of the form should be completed by the returning officer before it is provided to the candidate.
- The candidate will ensure the name and address of the campaign worker and the offices they are to represent are complete and that the campaign period has been completed.
- The campaign worker signs the form.
- The candidate signs the form.

Important Tips:

The campaign worker must have this form available while campaigning.

Statement of Scrutineer or Official Agent (Form 16)

Purpose: serves as a statement made by a person or official agent who presents to the presiding deputy a written notice signed by a candidate, appointing the person to represent that candidate as his/her scrutineer at the voting station.

This form is to be used for local elections held in conjunction with a senate election and referendum vote. When the Statement of Scrutineer has been made by the person, they are then recognized by the presiding deputy as the scrutineer of the candidate. The scrutineer is making a statement to act on behalf of the candidate, and to maintain the secrecy of the vote. A person who makes a false statement is guilty of an offence and is liable to imprisonment up to six months or a fine up to \$10,000, or to both a fine and imprisonment.

Instructions:

- Enter the complete and official name of the local jurisdiction for which the election is being conducted, and the date of the election.
- The scrutineer or official agent will print their name and their complete address in the spaces provided, and to complete and read the applicable statement (acting as a scrutineer for local candidate, bylaw vote, municipal vote on a question, senate nominee, referendum question). The statement is not required to be read aloud.
- The Scrutineer or official agent will sign the form.

LOCAL JURISDICTION: _____, PROVINCE OF ALBERTA

Election Date: _____
date

I, _____, of

_____ complete _____ address and postal code

intend to be nominated, or have been nominated, to run for election as a candidate in the

_____ name of local jurisdiction and ward, if applicable

I understand that by completing this form, I am declaring my intent to become a candidate as defined in the *Local Authorities Election Act*, which carries with it certain obligations and responsibilities.**Candidate Information**

Title	Candidate Last Name	Candidate First Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender	Telephone Number	Email Address
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address 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):

SWORN (AFFIRMED) before me at the _____

of _____, in the Province of Alberta, this _____

day of _____, 20 ____

Signature of Returning Officer or Commissioner for Oaths or Notary Public in
and for Alberta_____
Signature of Candidate

Commissioner for Oaths Stamp

RETURNING OFFICER'S ACCEPTANCE

Returning office signals acceptance by signing this form

Signature of Returning Officer**IT IS AN OFFENCE TO SIGN A FALSE AFFIDAVIT OR A FORM THAT CONTAINS A FALSE STATEMENT**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 your local municipal office.

Nomination Paper and Candidate's Acceptance

Local Authorities Election Act
(Sections 12, 21, 22, 23, 27, 28, 47,
68.1, 151, Part 5.1)
Education Act (Sections 4(4), 74)

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 sections 21 and 27 of the *Local Authorities Election Act* and section 33(c) of the *Freedom of Information and Protection of Privacy 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

We, the undersigned electors of _____, nominate
Name of Local Jurisdiction and Ward (if applicable)

Candidate Surname

Given Names

of

Complete Address and postal code

as a candidate at the election

about to be held for the office of

Office Nominated for

of

Name of Local Jurisdiction

Signatures of at least **5 ELECTORS ELIGIBLE TO VOTE** in this election in accordance with sections 27 and 47 of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* (if applicable). If a city or a board of trustees under the *Education Act* passes a bylaw under section 27(2) of the *Local Authorities Election Act*, then the signatures of up to 100 electors eligible to vote may be required.

Printed Name of Elector	Complete Address and Postal Code of Elector	Signature of Elector

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;
- 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 12, 21, 22, 23, 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;

- THAT I am appointing

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

as my official agent.

THAT I will read and abide by the municipality's code of conduct if elected (if applicable); and

THAT 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

Candidate's Surname

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

SWORN (AFFIRMED) before me

at the _____ of _____

in the Province of Alberta,

this _____ day of _____, 20____

Candidate's Signature

Commissioner's Stamp

Signature of Returning Officer or Commissioner for Oaths
or Notary Public in and for Alberta
(Also include printed or stamped name and expiry date)

RETURNING OFFICER'S ACCEPTANCE

Returning Officer signals acceptance by signing this form:

Signature of Returning Officer

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

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 27 of the *Local Authorities Election Act* and section 33(c) of the *Freedom of Information and Protection of Privacy 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

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.

**Enumerator, Candidate or Official Agent Proof
of Identification for Section 52 Access***Local Authorities Election Act*
(Section 52)

LOCAL JURISDICTION: _____, PROVINCE OF ALBERTA

ELECTION DATE: _____

VOTING SUBDIVISION OR WARD (If Applicable): _____

For the purposes of access authorized under section 52 of the *Local Authorities Election Act*, this
constitutes as identification for _____

Name

of _____

-----C-----
Complete Address and Postal Code

serving in the capacity of _____

Office

This appointment is in effect for the 20 _____ campaign period.

Section 52 of the *Local Authorities Election Act* states that a person to whom an enumerator, a candidate, an official agent or a campaign worker on behalf of a candidate has produced identification in the prescribed form, indicating that the person is an enumerator, a candidate, an official agent or a campaign worker shall not

- (a) obstruct or interfere with, or
- (b) cause or permit the obstruction or interference with

the free access of the enumerator, candidate, official agent or campaign worker to each residence in a building containing 2 or more residences or to each residence in a mobile home park.

Signature of _____
Returning Officer or Deputy Returning Officer_____
Signature of Enumerator, Candidate, or Official Agent Named Above

Campaign Worker Proof of Identification

Local Authorities Election Act
(Section 52)

LOCAL JURISDICTION: _____, PROVINCE OF ALBERTA

ELECTION DATE: _____

VOTING SUBDIVISION OR WARD (If Applicable): _____

For the purposes of access authorized under section 52 of the *Local Authorities Election Act*, this
constitutes identification for _____

Name

of _____
Complete Address and Postal Code

serving in the capacity of _____
Office

This appointment is in effect for the 20____ campaign period.

Section 52 of the *Local Authorities Election Act* states that a person to whom an enumerator, a candidate, an official agent or a campaign worker on behalf of a candidate has produced identification in the prescribed form, indicating that the person is an enumerator, a candidate, an official agent or a campaign worker shall not

- (a) obstruct or interfere with, or
- (b) cause or permit the obstruction or interference with

the free access of the enumerator, candidate, official agent or campaign worker to each residence in a building containing 2 or more residences or to each residence in a mobile home park.

Candidate's Signature

Campaign Worker's Signature



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 sections 16(2), 68.1, 69 and 70 of the *Local Authorities Election Act* and section 33(c) of the *Freedom of Information and Protection of Privacy 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,
Name of Province

(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[] 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[] 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





Release of Candidate Information

I, _____, hereby grant consent to the Town of
(Candidate Name)

Hinton to release the following personal information about me to the Province of Alberta,
any interested person, organization, or media source, from the date the Release is
signed until the completion of the 2025 municipal election.

Name: _____

Address: _____

Campaign Office Address: _____

Phone numbers: _____
Campaign Office Home

Cell Other

E-mail Address: _____ Website: _____

Signature

Date

The personal information that is being collected under the authority of the *Local Authorities Election Act* will be used for the purpose of providing Candidates with election information and providing contact information about Candidates to members of the public and the media during the 2025 municipal election. It is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, contact the FOIP Coordinator at 780-865-6040.