

**Notice of Intent**  
*Local Authorities Election Act (Section 147.22)*

LOCAL JURISDICTION: \_\_\_\_\_, PROVINCE OF ALBERTA

Election Date: October 20, 2025  
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 Town of Westlock.

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

Gender Telephone Number Email Address

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 \_\_\_\_\_, 2025

\_\_\_\_\_  
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© of the *Freedom of Information and Protection of Privacy Act*. For questions about the collection of personal information, contact your local municipal office.