

SELF- NOMINATION AND ACCEPTANCE

I, _____
(full name of the candidate as the name will appear on the ballot, cannot use titles such as "MD," "Reverend," or "Chief")

who reside at: _____
(residence street name and number)

(city or town, zip code)

(county), (state)

(mailing address if different from residence address)

hereby nominate myself and accept such nomination for the office of Director for a three-year term on the Board of Directors of the Lake City Area Fire Protection District at the regular election on May 3, 2022, **and will serve if elected.**

I affirm that I am an eligible elector of the Lake City Area Fire Protection District and am an eligible elector at the date of signing this Self-Nomination and Acceptance Form.

I am an eligible elector because I am registered to vote in Colorado and am (mark one):

_____ A resident of the District, or area to be included in the district, for not less than 30 days; or

_____ The owner (or spouse of owner) of taxable real or personal property situated within the boundaries of the District,

Spouse's Name, if property is in spouse's name: _____

_____ A person who is obligated to pay taxes under a contract to purchase taxable property within the District.

I further affirm that I am familiar with the provisions of the Fair Campaign Practices Act as required in § 1- 45-110 of the Colorado Revised Statutes, and I shall not, in my campaign for this office, receive contributions or make expenditures exceeding twenty dollars (\$20) in the aggregate; however, if I do so, I shall thereafter file all disclosure reports required under the Fair Campaign Practices Act.

DATED this _____day of _____, 20__.

WITNESSED by the following registered elector:

(Signature of Candidate)

(Signature of Witness)

(Printed Full Name of Candidate)

(Printed Full Name of Witness)

(Telephone Number)

(Residence Street Name and Number)

(City or Town, Zip Code)

(Email Address)

(County)

(Telephone Number)

For Use by the Designated Election Official:

Received on: _____ (Date), at: _____(Time) Received by: _____(Name)

Self-Nomination Form Deemed:

Sufficient on: _____ .

Not Sufficient on: _____ Candidate Notified on: _____ (Date)

Received Amended Form on: _____ (Date/Time)

Amended Form Sufficient on: _____ (Date/Time)

Please note that starting January 1, 2010, all Campaign Political Finance filings will be handled by the Secretary of State's office rather than the counties.