## FORM I (FRONT)

[Clauses 67(3)(a),(b),(c),(d),(g) & (h) and subsections 67(3),(4) & (5) of the Act] [Subsection 37(1) of the Regulations]

#### Nomination

(Munici	vn of	Hepburn
ninate Al	(Name)	Thie Imain
	or legal description of land)	to be a candidate at the election
held on the/	3_day of	, 20 <u>2 4</u> for the office of
or:	(Municipality) of	
ncillor:	(Municipality) of	Hepburn
re.	Name (printed)	Street/Road Address or Legal Description of Land
un his	Jackson Will	
2 Hit.	CORY STROHA	ANT 201 15T Age S.
e & Azer	Ruzy WA Debra Gess	205 Prairie View Co
7/		\$ 210 Prairie View

<sup>\*</sup> require at least
25 signatures for a municipality with a population of 20,000 or more (except for Rural Municipalities);
5 signatures for a municipality with a population of less than 20,000 (except for Rural Municipalities); or
2 signatures for Rural Municipalities.

# FORM I (BACK) [Clauses 67(3)(a)(b)(c)(d)(g) & (h) of the Act] [Subsection 37(1) of the Regulations]

a(ti)	Candidate's Acceptance  (Name as it will appear on the ballot)  (Occupation)*  for the office of: (complete as applicable)
Mayor:	of(Municipality)
Councillor: 7	(Municipality) of Hepburn
before election	
2 I am a Canad	vill accept the office for which I was nominated; and
4 [ am not disc other Act from	qualified by The Local Government Election Act, 2015 of ally holding the office for which I am a candidate;
For municipalitie	s - excluding rural municipalities and resort villages
5 I have resided	in Saskatchewan for at least six consecutive months immediately date on which this nomination paper is submitted; and
6 I have reside	d in the municipality, or on land now in the municipality, aree consecutive months immediately preceding the date on emination paper is submitted.

Candidate's preferred contact information	
(Candidates must provide at least one of the following)	
Home Phone Number:	
Cell Phone Number: 306-491-2628	
Email Address: ahtmann 5@ gmalcin	
Other Contact Information:	

8 Dec 2023 SR 120/2023 s21.

<sup>\*</sup>Can be removed from the form, unless otherwise required by bylaw of the nunicipality pursuant to clause 9.1(3)(c) of the Act.

# PUBLIC DISCLOSURE STATEMENT Form 1

Vame:	ichnenn	
Address: 3/0-/5/	AJE N	
Disclosure of Employer, etc.:  Pursuant to (subclause 116(2)(a)(i) of  Act / subclause 160(2)(a)(i) of The No  every employer, person, corporation  someone in my family receives remu  manager, operator, contractor, or ag	erthern Municipalities Act , organization, associatio neration for services per	n, or other body from which I or
My Name or Name of Family Member	Payer	Nature of Relationship
A harman and the state of the s	Athletes In Act	in Employee
1/1/2	DS50	Employee
74		
4-4 / substance 150(2)(a)(ii) of The N	Iorthern Municipalities A	use 142(2)(a)(ii) of <i>The Municipalities</i> ct, 2010), I hereby disclose the name
Act / subclause 160(2)(a)(ii) of The Note of each corporation in which I or son someone in my family is a director o	lorthern Municipalities A neone in my family has a or a senior officer:	ct, 2010), I hereby disclose the Hame a controlling interest, or of which I or
Act / subclause 160(2)(a)(ii) of The Notes of each corporation in which I or sor	lorthern Municipalities A neone in my family has a	ct, 2010), I hereby disclose the Hame a controlling interest, or of which I or
Act / subclause 160(2)(a)(ii) of The N of each corporation in which I or son someone in my family is a director o	lorthern Municipalities A neone in my family has a or a senior officer:	ct, 2010), I nereby disclose the Hame a controlling interest, or of which I or
Act / subclause 160(2)(a)(ii) of The Note of each corporation in which I or son someone in my family is a director o	lorthern Municipalities A neone in my family has a or a senior officer:	ct, 2010), I nereby disclose the Hame a controlling interest, or of which I or
Act / subclause 160(2)(a)(ii) of The N of each corporation in which I or son someone in my family is a director o	lorthern Municipalities A neone in my family has a or a senior officer:	ct, 2010), I nereby disclose the Hame a controlling interest, or of which I or
Act / subclause 160(2)(a)(ii) of The Note of each corporation in which I or someone in my family is a director of My Name or Name of Family Member  Disclosure of Partnerships:	Name of Corporation  of The Cities Act / subclass  Northern Municipalities Act	ause 142(2)(a)(iii) of <i>The Municipalities</i>
Act / subclause 160(2)(a)(ii) of The North of each corporation in which I or someone in my family is a director of My Name or Name of Family Member  Disclosure of Partnerships:  Pursuant to (subclause 116(2)(a)(iii)  Act / subclause 160(2)(a)(iii) of The of each partnership or firm of which	Name of Corporation  of The Cities Act / subclass  Northern Municipalities Act	ause 142(2)(a)(iii) of <i>The Municipalities</i> Act, 2010), I hereby disclose the name
Act / subclause 160(2)(a)(ii) of The Note of each corporation in which I or someone in my family is a director of My Name or Name of Family Member  Disclosure of Partnerships:  Pursuant to (subclause 116(2)(a)(iii)  Act / subclause 160(2)(a)(iii) of The	neone in my family has a reasone in my family has a reason officer:  Name of Corporation  of The Cities Act / subclassion of t	ause 142(2)(a)(iii) of <i>The Municipalities</i> Act, 2010), I hereby disclose the name
Act/subclause 160(2)(a)(ii) of The North of each corporation in which I or someone in my family is a director of My Name or Name of Family Member  Disclosure of Partnerships:  Pursuant to (subclause 116(2)(a)(iii)  Act/subclause 160(2)(a)(iii) of The of each partnership or firm of which	neone in my family has a reasone in my family has a reason officer:  Name of Corporation  of The Cities Act / subclassion of t	ause 142(2)(a)(iii) of <i>The Municipalities</i> Act, 2010), I hereby disclose the name
Act/subclause 160(2)(a)(ii) of The Note of each corporation in which I or someone in my family is a director of My Name or Name of Family Member  Disclosure of Partnerships:  Pursuant to (subclause 116(2)(a)(iii)  Act/subclause 160(2)(a)(iii) of The of each partnership or firm of which	neone in my family has a reasone in my family has a reason officer:  Name of Corporation  of The Cities Act / subclassion of t	ause 142(2)(a)(iii) of <i>The Municipalities</i> Act, 2010), I hereby disclose the name

## Disclosure of Other Involvements:

Pursuant to (subclause 116(2)(a)(iv) of *The Cities Act* / subclause 142(2)(a)(iv) of *The Municipalities Act* / subclause 160(2)(a)(iv) of *The Northern Municipalities Act*, 2010), I hereby disclose the name of any corporation, enterprise, firm, partnership, organization, association, or body that I or someone in my family directs, manages, operates or is otherwise involved in that:

- (a) transacts business with the municipality;
- (b) the council considers appropriate or necessary to disclose; or
- (c) is prescribed:

My Name or Name of Family Member	Name of Corporation, Enterprise, Firm, Partnership, Organization, Association, or Body
-NA	

## **Disclosure of Property Holdings:**

Pursuant to (clause 116(2)(b) of *The Cities Act* / clause 142(2)(b) of *The Municipalities Act* / clause 160(2)(b) of *The Northern Municipalities Act*, 2010), I hereby disclose the municipal address or legal description of any property located in the municipality or an adjoining municipality that is owned by:

- (a) me or someone in my family; or
- (b) a corporation, incorporated or continued pursuant to *The Business Corporations Act* or the *Canada Corporations Act*, of which I or someone in my family is a director or senior officer or in which I or someone in my family has a controlling interest:

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## **Disclosure of Contracts and Agreements:**

Pursuant to (clause 116(2)(c) of *The Cities Act* / clause 142(2)(c) of *The Municipalities Act* / clause 160(2)(c) of *The Northern Municipalities Act*, 2010), I hereby disclose the general nature and any material details of any contract or agreement involving me or someone in my family that could reasonably be perceived to be affected by a decision, recommendation or action of the council and to affect my impartiality in the exercise of my office:

My Name or Name of Family Member	General Nature and Any Material Details of Any Contract or Agreement
19/	

#### DECLARATION

\ <del></del>	
do hereby declare that to the best of my knowledge, indallegations contained and made in this form are true and purpose of official registration in the full knowledge that	d complete. I make this declaration for the
Dated this 23 day of 0 of 20 2 7.  Witness	Signature of Declarant
	Date Received: October 23, 2024