

Election Office, 2001 Sherwood Drive, Sherwood Park AB, T8A 3W7

Phone 780-400-3800

**Instructions**

1. Complete and sign the form below.
2. File the completed form with the Election Office in person, or by emailing to [election@strathcona.ca](mailto:election@strathcona.ca).

I, \_\_\_\_\_, of  
(Candidate's full name)\_\_\_\_\_  
(Complete address and postal code)am hereby withdrawing my nomination as a candidate at the election about to be held for the office  
of \_\_\_\_\_.  
(Office nominated for)**Candidate's Acceptance**I, the above named candidate, have read the relevant sections of the *Local Authorities Election Act* and acknowledge that:

- the returning officer may not accept this withdrawal if it is submitted within 24 hours after the close of nominations if fewer than the required number of persons for the particular office are nominated, and my name will remain on the ballot; otherwise
- my name will not be included on the ballot;
- I am still required to file a disclosure statement under section 147.4 of the Act; and
- I am still required to address any surplus or deficit shown on my disclosure statement as required by the Act.

\_\_\_\_\_  
(Candidate's signature)\_\_\_\_\_  
(Date)**Returning Officer's Acceptance**\_\_\_\_\_  
(Returning officer's signature)\_\_\_\_\_  
(Date)