



Candidate's full name, address and postal code: _____

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 deposit 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 change by submitting a completed information form.

IT IS AN OFFENCE TO MAKE OR SIGN 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 questions concerning the collection of this personal information, please contact the Privacy Officer at 780-980-7173 or by email at foip@leduc.ca.