

## NOMINATION PAPER

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

### FORM I

We the undersigned, being voters of the Rural Municipality of Shellbrook, No. 493, nominate:

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Occupation)

\_\_\_\_\_  
(Street/Road Address or Legal Description of Land)

to be a candidate at the election to be held on the \_\_\_\_ day of \_\_\_\_\_  
20\_\_\_\_ for the office of:

COUNCILLOR: Rural Municipality of Shellbrook, No. 493; Division No. \_\_\_\_\_

REEVE: Rural Municipality of Shellbrook, No. 493

Signature	Name (printed)	Street/Road Address or Legal Description of Land
_____	_____	_____
_____	_____	_____

**NOTE:** In the case of nomination for REEVE, this form must be signed by two voters of the rural municipality.  
In the case of nomination for COUNCILLOR, this form must be signed by two voters of the division for which the person is seeking office.

## CANDIDATE'S ACCEPTANCE

I, \_\_\_\_\_, a (n) \_\_\_\_\_ (Occupation)

A candidate nominated for the office of:

COUNCILLOR: Rural Municipality of Shellbrook, No. 493; Division No. \_\_\_\_\_

REEVE: Rural Municipality of Shellbrook, No. 493

Declare that:

- 1 I am the full age of 18 years or will attain the full age of 18 years on or before Election Day;
- 2 I am a Canadian citizen;
- 3 If elected, I will accept the office for which I was nominated; and
- 4 I am not disqualified by *The Local Government Elections Act, 2015* or any other Act from holding the office for which I am a candidate;
- 5 I am eligible to vote in the municipality;
- 6 I am a resident of Saskatchewan.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Witness) \_\_\_\_\_ (Signature of Candidate)

\_\_\_\_\_  
(Witness)

## Criminal Record Checks

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**RM OF SHELLBROOK NO. 493**

**BYLAW NO 2022-04**

### **A BYLAW TO REQUIRE CRIMINAL RECORD CHECKS WITH NOMINATION FORMS**

The Council of the Rural Municipality of Shellbrook No. 493 in the Province of Saskatchewan enacts as follows:

1. Every candidate for municipal office shall obtain a criminal record check at their own expense.
2. The criminal record check shall be included with and form part of the nomination form submitted by the candidate for municipal office.
3. That successful candidates be reimbursed for criminal record checks.

Read a first time this 6th day of July, 2022

Read a second time this 6th day of July, 2022

Read a Third time and passed this 6th day of July, 2022

[SEAL]

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Reeve Doug Oleksyn

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Administrator Duane Storey

**RURAL MUNICIPALITY OF SHELLBROOK NO. 493 PUBLIC  
DISCLOSURE STATEMENT  
Form 1**

Name: \_\_\_\_\_

**Disclosure of Employer, etc.:**

Pursuant to (subclause 116(2)(a)(i) of *The Cities Act* / subclause 142(2)(a)(i) of *The Municipalities Act* / subclause 160(2)(a)(i) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of every employer, person, corporation, organization, association, or other body from which I or someone in my family receives remuneration for services performed as an employee, director, manager, operator, contractor, or agent:

My Name or Name of Family Member	Payer	Nature of Relationship

**Disclosure of Corporate Interests:**

Pursuant to (subclause 116(2)(a)(ii) of *The Cities Act* / subclause 142(2)(a)(ii) of *The Municipalities Act* / subclause 160(2)(a)(ii) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of each corporation in which I or someone in my family has a controlling interest, or of which I or someone in my family is a director or a senior officer:

My Name or Name of Family Member	Name of Corporation

**Disclosure of Partnerships:**

Pursuant to (subclause 116(2)(a)(iii) of *The Cities Act* / subclause 142(2)(a)(iii) of *The Municipalities Act* / subclause 160(2)(a)(iii) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of each partnership or firm of which I or someone in my family is a member:

My Name or Name of Family Member	Name of Partnership or Firm

**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

**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:

Owner(s)	Municipal Address or Legal Description	Municipality

**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

**DECLARATION**

I, \_\_\_\_\_ of the Rural Municipality of Shellbrook No. 493, in the Province of Saskatchewan, do hereby declare that to the best of my knowledge, information and belief, the statements and allegations contained and made in this form are true and complete, and I make this declaration for the purpose of official registration, in the full knowledge that it will be available for public examination.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature of Declarant

Date Received: \_\_\_\_\_

\_\_\_\_\_  
Administrator Signature: