SELF- NOMINATION AND ACCEPTANCE FLORISSANT WATER & SANITATION DISTRICT

C.R.S 1-13.5-303; 1-45-109(1); 1-45-110; SOS CPF Rule 16; 1-4-908(1); 1-4-912

I.				
(full name of	f the candic	late as the name will appea	ar on the ballot, cannot (use titles such as "MD," "Reverend," or "Chief")
who resides a	at:	ce Street Name and Numb		
	(Residen			
	(City or T	own, Zip Code)		
	<u>, , , , , , , , , , , , , , , , , , , </u>	2		
	(County,	State)		
	(Mailing /	Address, if different from re	esidence address)	
whose email	address	is:(Email Address		
-	-	-		for the office of Director for a four-year term
			nt Water & Sanita	tion District #1 at the regular election on May
2, 2023, and				
l affirm that l eligible electo	am an or at the	eligible elector of date of signing this	the Self-Nomination :	District and am an an Acceptance Form (or letter).
l am an	eligible e	lector because I am reg	istered to vote in Col	prado and am (mark one):
		A resident of the Distri		
		The owner (or spouse/ within the boundaries of	civil union partner of of the District, Spouse	owner) of taxable real or personal property situated 's Name, if property is in spouse's name:
		A person who is obliga District.	ited to pay taxes und	er a contract to purchase taxable property within the
defined in §	38-33.3-	ou are a member	do Revised Statu	board of a unit owner's association, as ites, located within the boundaries of the
required in § office, receiv	1- 45-1 ve contr e, howe	10 of the Colorado ibutions or make o ever, if I do so, I wi	o Revised Statute expenditures exc	the Fair Campaign Practices Act as es, and I will not, in my campaign for this ceeding \$200 in the aggregate during the all disclosure reports required under the
DATED this _	da	y of,	20	WITNESSED by the following registered elector
(Signature of Cano	lidate)			(Signature of Witness)
(Printed Full Name	e of Candid	ate)		(Printed Full Name of Witness)
(Email Address)				(Residence Address)
(Telephone Numbe	er)			(City or Town, Zip Code)

For Use by the Designated Election Official:

Received on:	_, at: Received by:	
(Date)	(Time)	(Name)
Self-Nomination Form Deemed:		
Sufficient on:	(Date/Time)	
Not Sufficient on:	Candidate Notified on:	(Date)
Received Amended Form on:	(Dat	e/Time)
Amended Form Sufficient on:	(Dat	e/Time)
County in which the district court that auth	orized the creation of the special (district is located:

County in which the district court that authorized the creation of the special district is located: _____ County.

Copy sent to Secretary of State on: _____ (Date) [If the election is <u>not</u> cancelled, the self-nomination and acceptance form must be filed with the Secretary of State no later than the 60th day prior to the election, March 2, 2023.].

***ATTENTION: DO NOT FILE WITH THE SECRETARY OF STATE IF YOUR ELECTION IS CANCELLED!

Please mail your form to:	Florissant Water & Sanitation District PO Box 565
	Florissant, CO 80816

Or email your form to: florissantwater@centruytel.net

Or deliver the form to the administrative office: 212 S Chestnut Street Woodland Park, CO 80863

Self-Nomination Forms must be turned in to the Election Judge by Friday, February 24, 2023. If you have any questions, call (719) 686-6840