## **SELF- NOMINATION AND ACCEPTANCE**

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

I.	
(full name of the candidate as the name will appear on the ballot,	cannot use titles such as "MD," "Reverend," or "Chief")
who reside at:	<del></del>
(Residence Street Name and Number)	
(City or Town, Zip Code)	<del></del>
(County, State)	
(Mailing Address, if different from residence address	s)
•	.,
whose email address is:(Email Address)	
hereby nominate myself and accept such nomina	ation for the office of Director for a <b>three</b> -year term
for the Office of Director on the Board of Directors of	•
regular election on May 3, 2022, and will serve if el	
I affirm that I am an eligible elector of the Florissal elector at the date of signing this Self-Nomination an	•
I am an eligible elector because I am registered to vote	in Colorado and am (mark one):
☐ A resident of the District; or	
	tner of owner) of taxable real or personal property situated Spouse's Name, if property is in spouse's name:
A person who is obligated to pay taxe District.	es under a contract to purchase taxable property within the
Mark here if you are a member of an execude defined in § 38-33.3-103 of the Colorado Revised district for which you are running for office.	
I further affirm that I am familiar with the provision required in § 1- 45-110 of the Colorado Revised Soffice, receive contributions or make expenditure election cycle, however, if I do so, I will thereafted Fair Campaign Practices Act.	Statutes, and I will not, in my campaign for this es exceeding \$200 in the aggregate during the
DATED thisday of, 2022.	WITNESSED by the following registered elector:
(Signature of Candidate)	(Signature of Witness)
(Printed Full Name of Candidate)	(Printed Full Name of Witness)
(Email Address)	(Residence Address) (County) (City/Town, State, Zip Code)
(Telephone Number)	(Telephone Number)

Division of Local Government-Department of Local Affairs - 2022 Election Revised 11/29/2021 SD-7

## For Use by the Designated Election Official:

Received on:	,	at:Rec	eived by:	
,	(Date)	(Time)	eived by:	(Name)
Self-Nomination Form D	Deemed:			
Sufficient on:		(Date/Tim	ie)	
Not Sufficient o	n:	Candidat	e Notified on:	(Date)
Received Amer	nded Form on:		(Date/Time)	
Amended Form	Sufficient on:		(Date/Time)	
County in which the dist	trict court that author	rized the creation o	f the special district is locate	ed:
After review, the DEO s the 67 <sup>th</sup> day prior to the	hall provide notificat election.	ion of the sufficiend	cy or insufficiency of the car	ndidate; no later than
***ATTENTION: DO NO	OT FILE WITH THE	SECRETARY OF	STATE IF YOUR ELECTIO	N IS CANCELLED!
Copy sent to Secretary and acceptance form m (February 25, 2022).	of State on: ust be filed with the	(Date) [If t Secretary of State	he election is <u>not</u> cancelled no later than the 60 <sup>th</sup> day pr	, the self-nomination rior to the election,
Please mail your form to:	Florissant Water & S PO Box 565	Sanitation District		
	Florissant, CO 8081	6		
Or you can email your for	m to: florissantwater(	@centurytel.net		
Self -Nomination Forms n If you have any questions,		<i>.</i>	Friday, February 25, 2022.	