FORM 16

Statement of Scrutineer or Official Agent

Local Authorities Election Act
(Sections 16(2), 68.1, 69, 70)

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 sections 16(2), 68.1, 69 and 70 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 any questions concerning the collection of this personal information, please contact

_____ _____
Title of the Responsible Official Business Phone Number

LOCAL JURISDICTION: _____, PROVINCE OF ALBERTA

ELECTION DATE (OR VOTE ON A BYLAW OR QUESTION): _____

I, _____,
Name of Scrutineer or Official Agent

of _____
Complete Address and Postal Code

in the Province of _____, am at least 18 years of age and,
Name of Province

(a) For the purposes of an election, will act as scrutineer on behalf of _____
Name of Candidate
for the office of _____
Office for which Candidate was Nominated

OR

(b) For the purposes of a vote on a bylaw, will act as scrutineer for those persons who are interested in

(Check [✓] One) ◯ **promoting** the passing of Bylaw No. _____

◯ **opposing** the passing of Bylaw No. _____

OR

(c) For the purposes of a vote on a question, will act as scrutineer on behalf of those persons who are interested in

(Check [✓] One) ◯ voting in the **positive** on the question set out.

◯ voting in the **negative** on the question set out.

AND I will in all respects maintain and aid in maintaining the absolute secrecy of the vote.

_____
Signature of Scrutineer or Official Agent

IT IS AN OFFENCE TO SIGN A FALSE STATEMENT