

NOTE: Note: The personal information collected through this form is for administering the election. This collection is authorized by section 4(c) of the Protection of Privacy Act. For questions about the collection of personal information, please contact the Access and Privacy Coordinator at 780-418-6663 or email election@stalbert.ca or St. Albert Public Schools' Access and Privacy Coordinator at 780-460-3712.

Candidate's Full Name: _____

Candidate's Address and Postal Code: _____

Address(es) 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 Depository Listed
Above (if applicable): _____

Where there is any change in the above-mentioned information, the candidate shall notify the City of St. Albert in writing within 48 hours of such changes by submitting a completed information form.