Appendix C

FORM I (FRONT)

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

Nomination

We the undersign	ned. being voters of the:
	TOWN OF BALGONIE
nominate Mi	CHELLE CAING, OWNER RESIDENT
Street front	LI APPEUE ST , to be a candidate at the election of land)
	9 TH day of NOVEMBER , 2020 for the office of:
Complete one) Mayor	of
mayor _	(Municipality)
Councillor:	TOWN of BALGONIE
ignature *	Name (printed) Street/Road Address or
na Rolup-	Front Trina Roluts Frail 408 Queen
Sul Fran	DBorton Frail 408 Queen St.
andrea Os	otoby Andrea Oxtoby 366 Main Str.
in the	Cam Paul 109 Railboury S
1	- Kill Koral 120 M. St. 1

* require at least

14 Feb 2020 SR 11/2020 s7.

 ⁵ signatures for a municipality with a population of less than 20,000 (except for Rural Municipalities

FORM I (BACK)

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

Candidate's Acceptance			
a(n)	POSTMASTER OF ZEHNER OST OFF (Occupation)*		
a cand	lidate nominated for the office of: (complete as applicable)		
Mayor/Reeve: of			
Cour	ncillor: TOWN of BALGONIE (Municipality)		
doalo	re 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 <i>The Local Government Election Act, 2015</i> or any other Act from holding the office for which I am a candidate:		
For	nunicipalities - excluding rural municipalities and resort villages		
5	I have resided in Saskatchewan for at least six consecutive months immediately preceding the date on which this nomination paper is submitted: and		
6	I have resided in the municipality, or on land now in the municipality, for at least three consecutive months immediately preceding the date on which this nomination paper is submitted.		
Dated	at Charleson this 2ND day of COBER 2020		
Signal	Luciof Candidate) Luan Waite (Witness)		

MUNICIPALITIES

FORM B.1 [Clause 6.1(1)(a)]

[Clause $6.1(1)(a)$]			
RESULTS OF CRIMINAL RECORD CHECK FOR CANDIDATE FOR ELECTION			
NAME OF CANDIDATE: Last Name Given Name Middle Name			
PREVIOUS NAME and/or ANY OTHER NAMES USED: MICHELLE HOFFMAN			
ADDRESS: 502 QUAPPELLE ST			
Apt.# Street/Avenue Street/Avenue 306-581-6001 City/Town Province/Postal Code Telephone Number			
DATE OF BIRTH: 1964/08/31 PLACE OF BIRTH: REGINA			
Year/Month/Day			
GENDER: Male / Female			
MUNICIPALITY: DINN of SALGONIE			
(town, northern village, (name of municipality) northern hamlet)			
NAME OF LOCAL POLICE SERVICE THAT CONDUCTED CHECK: WHITE BUTHE ROLL			
CRIMINAL RECORD CHECK ATTACHED: Yes/No			
Note: The criminal record check from the local police service must be attached to this form to be acceptable for submission with the nomination paper and must have been completed not more than 30 days before the date of submission.			
STATEMENT OF CONSENT: I consented to a search of all records available at the time the search was conducted, including charges before the courts (including active alternative measures, stays of proceedings entered within one year of this request and findings of unfit to stand trial), findings of guilt or convictions (including youth records accessible under subsection 119(2) of the Youth Criminal Justice Act) and court orders (including peace bonds, restraining orders and recognizances under sections \$10.01, \$10.1 or \$10.2 of the Criminal Code) registered in my name in the National Repository and local records available to the police service. I understand that if a possible record existed, it would not be disclosed until identification was confirmed by either myself or by fingerprints. I also understand that apprehensions, orders or other records relating to The Mental Health Services Act or The Youth Drug Detoxification and Stabilization Act were not disclosed.			
I understand criminal record checks submitted pursuant to section 89.1 of The Municipalities Act:			
 are not considered to be for a volunteer position; are not considered to be for a position with the vulnerable sector; 			
 are not considered to be for a position with the vulnerable sector; do not require fingerprint verification for the sake of submission with the nomination paper and it was my option to submit a fingerprint verification to confirm my identity and record or lack of a record; 			
· do not require a release of information to a third party because I received the results personally; and			
are not required to include copies of the records themselves.			
Dated this day of COOPER 20 TO. Signature			

17 Dec 2010 SR 121/2010 s8.

Important Notices

Protected B once completed

PIB CMP PPU 030

PIB CMP PPU 005

Reference Number 1518-2020/10

Release of Results of Criminal Record Check

• This information does not constitute a Certified Criminal Record by the RCMP.

This information may not contain all criminal	sued based on the submission of fingerprints to the F al record convictions, or convictions and records rela		
Youth Criminal Justice Act.			
	t provincial/territorial ministries for driver's abstract.		
Applicant Information			C-11-11-1-1-1
Current Legal Surname (required)	Current Legal Given Na	mes (required)	
LAING	Michelle		
Gender	Date of Birth (yyyy-mm-	dd; required)	
Male Female	1964-03-31		
Current Address (required)	City (required)	Province	Postal Code (A9A 9A9; required
502 Qu'Appelle Street	Balgonie	SK	SOG OEO
Criminal Record Check Results	s		
Note: This is not an affirmation of good chara	cter		
confirmed by fingerprint comparison. Dela Repository of Criminal Records. Not all o Incomplete: Based solely on the name a	n that a criminal record does or does not exist at the ays do exist between a conviction being rendered in ffences are reported to the RCMP National Reposito and date of birth provided by the applicant, a search	court, and the details being acc ory of Criminal Records. of the RCMP National Reposito	cessible on the RCMP National
criminal record does or does not exist record police service or accredited private finger	s management systems and court records, where ap- quires the applicant to submit fingerprints to the RCM printing company. Delays do exist between a convic al Records. Not all offences are reported to the RCM	MP National Repository of Crimi tion being rendered in court, ar	nal Records by an authorized nd the details being accessible on
resulted in a possible match to a registered searched. Positive identification that a criffingerprint comparison. As such, the crim	me and date of birth provided by the applicant, a sea ed criminal record. All available police records mana minal record does or does not exist at the RCMP Na inal record information declared by the applicant doe ng rendered in court, and the details being accessib nal Repository of Criminal Records.	gement systems and court reco ational Repository of Criminal R es not constitute a Certified Crir	ords, where applicable were also ecords can only be confirmed by minal Record by the RCMP.
information declared by the applicant, the	al Repository of Criminal Records: Based solely of ere was a criminal conviction registered on the date less do exist between a conviction rendered in court are	below, but not a sex offender re	ecord where a Record
If "Local Conviction not Added to National Re (yyyy-mm-dd)	pository of Criminal Records" was selected, please	provide the date the criminal co	onviction was registered on.
Additional Comments (this field expands)			
Received by			
Employee Name	HRMIS No.	Detachment Stamp or Sea	al
Lori Loker	000250195	RCMP White	Butte Detachment
Signature	Date (yyyy-mm-dd)	58 Great	Plains Road
9. hoker	OCT 0 5 2020		irk, SK S4L 1C3

PUBLIC DISCLOSURE STATEMENT CANDIDATE FOR TOWN OF BALGONIE MUNICIPAL ELECTION 2020

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,

Name:

Disclosure of Employer, etc.:

1. This form, when completed, is a public document.

contractor, or agent:	,	, and an	ter, manager, eporator,
My Name or Name of Family Member	Payer	\sim	Nature of Relationship
MICHELLE LAINS	CANAZ	A KOST,	
DAVE LAING	Sask H		HUSBAND
DAVE LANG	OHEG	ATRANS.	HUSBAND
THING!	BACE.	fire & 1st rest	THUSBAND
Disclosure of Corporate Interests: Pursuant to (subclause 116(2)(a)(ii) of <i>The Cities A</i> o	ct/subclause 142(2)(a)(ii	i) of <i>The Municipalities Act/</i>
subclause 160(2)(a)(ii) of <i>The N</i> i	orthern Municipalitie	es Act, 2010), I hereby c	lisclose the name of each
corporation in which I or someor	ne in my family has	a controlling interest, or	of which I or someone in
my family is a director or a senio	r officer:		
My Name or Name of Family	Member	Name of Corporation	
my rame of rame of rammy	WCITIBET	Name of Corporation	
B. 1			
Disclosure of Partnerships:	\/'''\ - f Tb - O''' A		
Pursuant to (subclause 116(2)(a)(III) of The Cities A	<i>ct</i> /subclause 142(2)(a)(i	iii) of The Municipalities Act/
subclause 160(2)(a)(iii) of <i>The N</i> partnership or firm of which I or s	connern wurncipanu comeone in my fam	es <i>Act, 2010)</i> , i nereby (ilv is a mombor:	disclose the name of each
partition of firm of which for s	someone in my fam	ily is a member.	
My Name or Name of Family I	Member	Name of Partnership	or Firm
Note:			

Disclosure of Business Arrangements:

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 disclose²; 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:

- (i) me or someone in my family; or
- (ii) 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
DEM LAING	LOT 1, BUKAY	BALGONIE

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		

² Described in a municipal policy or bylaw

DECLARATION

1	DECLARATION	
hereby declare that to the best of my knowledg contained and made in this form are true and com registration, in the full knowledge that it will be avail	plete, and I make this declara	rovince of Saskatchewan, do e statements and allegations tion for the purpose of official
Dated this 2ND day GOOBER, 2020.		156-5
Lucann Waite	mende	Signature of Declarant
	Date Received	Artober 5/20