

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 undersigned, being voters of the:

TOWN of BALGONIE
(Municipality)

nominate WADE, HOFFMAN
(Name)

of 422 Terra Nova Dr, to be a candidate at the election
(Street/road address or legal description of land)

to be held on the 13th day of November, 2024 for the office of:
(Complete one)

Mayor/Reeve: of
(Municipality)

Councillor: Town of BALGONIE
(Municipality)

Table with 3 columns: Signature, Name (printed), Street/Road Address or Legal Description of Land. Contains 5 rows of handwritten signatures and printed names/addresses.

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

I, WADE HOFFMAN, (Name as it will appear on the ballot)

a(n) Senior Operator WCAm 158 UWA (Occupation)*

a candidate nominated for the office of: (complete as applicable)

Mayor/Reeve: of (Municipality)

Councillor: Town of Balgonie (Municipality)

declare 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 The Local Government Election Act, 2015 or any other Act from holding the office for which I am a candidate;

For municipalities - 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.

Candidate's preferred contact information

(Candidates must provide at least one of the following)

Home Phone Number:

Cell Phone Number: 306 539-4121

Email Address: wadehoffman@sasktel.net

Other Contact Information:

Dated at Balgonie, this 8 day of October, 20 24.

Wade Hoffman (Signature of Candidate)

[Signature] (Witness)

[Signature] (Witness)

TOWN OF BALGONIE

PUBLIC DISCLOSURE STATEMENT – Candidate for Municipal Office

Form 1

Name: WADE HOFFMAN

Disclosure of Employer, etc.:

Pursuant to subclause 142(2)(a)(i) of *The Municipalities Act*, 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, contractor, or agent:

My Name or Name of Family Member	Payer	Nature of Relationship
WADE HOFFMAN	WCRM158 WWA	Employer
Lynn Hoffman	Mediology	Spouse

Disclosure of Corporate Interests:

Pursuant to subclause 142(2)(a)(ii) of *The Municipalities Act*, I hereby disclose the name of each corporation in which I or someone in my family has a controlling interest, or of which I or someone in my family is a director or a senior officer:

My Name or Name of Family Member	Name of Corporation

Disclosure of Partnerships:

Pursuant to subclause 142(2)(a)(iii) of *The Municipalities Act*, I hereby disclose the name of each partnership or firm of which I or someone in my family is a member:

My Name or Name of Family Member	Name of Partnership or Firm
Lynn Hoffman	Mediology

Disclosure of Other Involvements:

Pursuant to subclause 142(2)(a)(iv) of *The Municipalities Act*, 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 disclose; 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 142(2)(b) of *The Municipalities Act*, I hereby disclose the municipal address or legal description of any property located in the municipality or an adjoining municipality that is owned by:

- (a) me or someone in my family; or
- (b) 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
Lynn + WADE Hoffman	422 Terra Nova Dr	Balgownie
Lynn + WADE Hoffman	226 East Mountain Lake Rd	Rm of Alckillop
Lynn Hoffman Marie Gottselig	NE 11-17-17 W2	Rm of Edenwold

Disclosure of Contracts and Agreements:

Pursuant to clause 142(2)(c) of *The Municipalities Act*, 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

Declaration

I, WADE HOFFMAN, of the Town of Balgonie, in the Province of Saskatchewan, do hereby declare that to the best of my knowledge, information and belief, the statements and allegations contained and made in this form are true and complete, and I make this declaration for the purpose of official registration, in the full knowledge that it will be available for public examination.

Dated this 8 day of OCT, 2024.

[Signature]

Witness

[Signature]

Signature of Declarant

Date Received: October 8, 2024

Returning Officer/Nomination Officer: [Signature]

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

RESULTS OF CRIMINAL RECORD
CHECK FOR CANDIDATE FOR ELECTION

NAME OF CANDIDATE: Hoffman Wade Ernest
Last Name Given Name Middle Name

PREVIOUS NAME and/or ANY OTHER NAMES USED: _____

ADDRESS: 422 Terra Nova Dr _____
Apt.# Street/Avenue
Balgonie **Sask S0G0E0** 306-539-4121
City/Town Province/Postal Code Telephone Number

DATE OF BIRTH: 1968-06-09 _____ PLACE OF BIRTH: Regina _____
Year/Month/Day

GENDER: Male / Female

MUNICIPALITY: Town _____ of Balgonie _____
(town, northern village, northern hamlet) (name of municipality)

NAME OF LOCAL POLICE SERVICE THAT CONDUCTED CHECK: White Butte _____

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 810.01, 810.1 or 810.2 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;
- 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 8 day of October 2024. Signature: Wade Ernest



PIB	CMP PPU 030
PIB	CMP PPU 005

Release of Results of Criminal Record Check

Reference Number
1518-10/24

Important Notices

- This information does not constitute a Certified Criminal Record by the RCMP.
- A Certified Criminal Record can only be issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records.
- This information may not contain all criminal record convictions, or convictions and records related to "young persons" pursuant to the *Youth Criminal Justice Act*.
- Motor vehicle records not checked; consult provincial/territorial ministries for driver's abstract.

Applicant Information

Current Legal Surname (required) HOFFMAN	Current Legal Given Names (required) Wade Ernest		
Gender <input checked="" type="radio"/> Male <input type="radio"/> Female	Date of Birth (yyyy-mm-dd; required) 1968-06-09		
Current Address (required) 422 Terra Nova Drive, P.O. Box 258	City (required) Balgonie	Province SK	Postal Code (A9A 9A9; required) S0G 0E0

Criminal Record Check Results

Note: This is not an affirmation of good character

Negative: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records did not identify any records with the name and date of birth of the applicant. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by fingerprint comparison. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.

Incomplete: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records could not be completed. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist requires the applicant to submit fingerprints to the RCMP National Repository of Criminal Records by an authorized police service or accredited private fingerprinting company. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.

Possible Match: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records has resulted in a possible match to a registered criminal record. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by fingerprint comparison. As such, the criminal record information declared by the applicant does not constitute a Certified Criminal Record by the RCMP. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.

Local Conviction not Added to National Repository of Criminal Records: Based solely on the name and date of birth provided and the criminal record information declared by the applicant, there was a criminal conviction registered on the date **below**, but not a sex offender record where a Record Suspension (Pardon) was granted. Delays do exist between a conviction rendered in court and the details being accessible on the RCMP National Repository of Criminal Records.

If "Local Conviction not Added to National Repository of Criminal Records" was selected, please provide the date the criminal conviction was registered on. (yyyy-mm-dd)

Additional Comments (this field expands)

Received by

Employee Name A.Mehl, Detachment Assistant	HRMIS No. 000256057	Detachment Stamp or Seal RCMP White Butte Detachment 58 Great Plains Road Emerald Park, SK S4L 1C3
Signature 	Date (yyyy-mm-dd) OCT 07 2024	



PIB	CMP PPU 005
PIB	CMP PPU 030

Declaration of Criminal Record

Reference Number

This form must be completed and submitted with RCMP form 6388 - Consent for the Release of Police Information

Applicant

Last Name HOFFMAN	Given Name 1 Wade	Given Name 2 Ernest
Maiden Name or Other Last Name	Gender <input checked="" type="radio"/> Male <input type="radio"/> Female	Date of Birth (yyyy-mm-dd) 1968-06-09
Current Address 422 Terra Nova Drive, P.O. Box 258	City Balgonie	Province SK
		Postal Code (A9A 9A9) S0G 0E0

Certified Criminal Record

Note: A Certified Criminal Record can only be issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records.

Declaration of Criminal Record

- Does not constitute a Certified Criminal Record by the RCMP.
- May not contain all criminal record convictions.

Declare the following information:

- All convictions for offences under federal law.

Do not declare the following information:

- Absolute Discharges (disclosed for a period of 1 year).
- Conditional Discharges (disclosed for a period of 3 years).
- Any offences while you were a "young person" (12 years old but less than 18 years old), pursuant to the *Youth Criminal Justice Act*.
- Any charges for which you were not convicted, for example, charges that were withdrawn or dismissed.
- Any provincial or municipal offences.
- Any charges dealt with outside of Canada.
- Any charge for which you received a stay of proceedings (disclosed until retention period is met).

Offence	Date of Sentence (yyyy-mm-dd)	Location
Driving with more than 80 mgs of Alcohol in Blood Sec 253(B) CC	1991-11-21	Regina, SK

Signature

I certify that the information provided is correct to the best of my knowledge.

Signature of Applicant 	Date (yyyy-mm-dd) 2024 10 7
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Received By

Employee Name A.Mehl, Detachment Assistant	HRMIS 000256057	Detachment Stamp or Seal RCMP White Butte Detachment 58 Great Plains Road Emerald Park, SK S4L 1C3
Signature 	Date (yyyy-mm-dd) OCT 07 2024	