

SELF-NOMINATION AND ACCEPTANCE
OURAY COUNTY REGIONAL SERVICE AUTHORITY

1-4-501; 1-45-109(1); 1-45-110; SOS CPF

I,

(Full name of the candidate as the name will appear on the ballot; cannot use titled such as "MD," "Reverend," or "Chief," etc.)

who resides at (residence street name and number) _____

(city or town, zip code) _____

(mailing address if different) _____

hereby nominate myself and accept such nomination for the office of Director for a (check one)

___ two year/ a ___ four year term for District _____ Director on the Board of Directors of the Ouray County Regional Service Authority at the regular election on November _____, and will serve if elected. I affirm that I am an eligible elector in District ___ of the Ouray County Regional Service Authority based on (i) being an eligible elector (18 years or older registered to vote), and (ii) being a resident of the above named district. [32-7-110(1) C.R.S.]

I further affirm that I am familiar with the provisions of the Fair Campaign Practices Act as required in §1-45-110 of the Colorado Revised Statutes and I shall not, in my campaign for this office, receive contributions or make expenditures exceeding two hundred dollars (\$200) in the aggregate [C.R.S. 1-45-108]; however, if I do so, I shall thereafter file all disclosure reports required under the Fair Campaign Practices Act.

Dated this _____ day of _____, 20____ Witnessed by the following registered elector:

(Signatures of Candidate)

(Printed full name of Candidate)

(telephone number)

(e-mail address)

(Signature of Witness)

(Printed full name of Witness)

(Residence street name and number)

(City or town, zip code)

(telephone number)