SELF-NOMINATION AND ACCEPTANCE FORM

I, _____,
(full name of candidate as the name will appear on the ballot)
who reside at:

_____
(residence street name and number)

_____
(mailing address if different from residence address)

_____,
(city or town, zip code) (county)

hereby nominate myself and accept such nomination for the office of Director of the West Metro Fire Protection District at the May 8, 2012 election for the following term:

_____ 4 year term ending May 2016 and will serve if elected.

I affirm that I am an eligible elector of the West Metro Fire Protection District and am an eligible elector at the date of signing this Self-Nomination and Acceptance Form (or letter).

I am an eligible elector because I am registered to vote in Colorado and am (mark one):

_____ A resident of the District, or area to be included in the district, for not less than 30 days; or
_____ The owner (or spouse of owner) of taxable real or personal property situated within the boundaries of the District, _____
Spouse's Name, if property is in spouse's name;
_____ A person who is obligated to pay taxes under a contract to purchase taxable property within the District.

_____

_____I am/_____I am not a member of an executive board of a unit owners association, as defined in §38--33.3-103, C.R.S., located within the boundaries of the District for which I am running for office. NAME OF HOA:
_____

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 twenty dollars ($20) in the aggregate; however, if I do so, I shall thereafter file all disclosure reports required under the Fair Campaign Practices Act.

_____ _____

Date of Birth of Candidate Phone Number of Candidate
(for verification of voter registration) Email: _____

_____ _____ _____

Printed Name of Candidate Signature of Candidate Date

Information provided by the witness who is a registered elector: _____
Printed Name of Witness

_____ _____

_____ _____

(residence address) (mailing address if different from residence)

_____
(county)

_____ _____ _____

Signature of Witness Date Phone Number of Witness

Form must be filed with the Designated Election Official (DEO) of the District at address: 3535 S. Kipling St., Lakewood, CO 80235 not less than 67 days prior to the regular election. Official Due Date: Close of business on March 2, 2012.

<u>For Use by the Designated Election Official:</u>

Received on: _____ (Date), at: _____(Time) Received by: _____(Name)

Self-Nomination Form Deemed:
Sufficient on: _____ .
Not Sufficient on: _____ Candidate Notified on: _____ (Date)
Received Amended Form on: _____ (Date/Time)
Amended Form Sufficient on: _____ (Date/Time)

Please note that starting January 1, 2010, all Campaign Political Finance filings will be handled by the Secretary of State's office rather than the counties. Send original completed Self Nomination forms to: Colorado Secretary of State, Attn: Elections Division, 1700 Broadway Suite 200, Denver, CO 80290. Keep copy for election file.