

# Statement of Scrutineer or Official Agent

*Local Authorities Election Act*  
(Sections 16(2), 68.1, 69, 70)

The personal information collected through this form is for administering the election. This collection is authorized by section 33(c) of the *Freedom of Information and Protection of Privacy Act*. For questions about the collection of personal information, contact

Manager of Legislative Services, Beaver County - 780-663-3730 Ext. 1016

Business Title/Organization

Box 140

Address

Ryley

City or Town

AB

Province

T0B4A0

Postal Code

LOCAL JURISDICTION: BEAVER COUNTY, PROVINCE OF ALBERTA

ELECTION DATE (OR VOTE ON A BYLAW OR QUESTION): October 20, 2025

I, \_\_\_\_\_,  
Name of Scrutineer or Official Agent

of \_\_\_\_\_,  
Complete Address and Postal Code

in the Province of \_\_\_\_\_, am at least 18 years of age and,  
Name of Province

**(a) For the purposes of an election,** will act as scrutineer on behalf of \_\_\_\_\_  
Name of Candidate  
for the office of Councillor - Division 3  
Office for which Candidate was Nominated

**OR**

**(b) For the purposes of a vote on a bylaw,** will act as scrutineer for those persons who are interested in

(Check [✓] One)  **promoting** the passing of Bylaw No. \_\_\_\_\_

**opposing** the passing of Bylaw No. \_\_\_\_\_

**OR**

**(c) For the purposes of a vote on a question,** will act as scrutineer on behalf of those persons who are interested in

(Check [✓] One)  voting in the **positive** on the question set out.

voting in the **negative** on the question set out.

AND I will in all respects maintain and aid in maintaining the absolute secrecy of the vote.

\_\_\_\_\_  
Signature of Scrutineer or Official Agent

**IT IS AN OFFENCE TO SIGN A FALSE STATEMENT**