SELF- NOMINATION AND ACCEPTANCE CHERRY HILLS NORTH METROPOLITAN DISTRICT

vho reside at:	(Residence Street Name and Number)	_
	(City or Town, Zip Code)	_
	(County, State)	_
	(Mailing Address, if different from residence address)	_
vhose email a	address is:	
	(Email Address)	
erm on the Bo	nate myself and accept such nomination for to bard of Directors of the Cherry Hills North Metro and will serve if elected.	
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I affirm that I am an eligible elector of the Cherry Hills North Metropolitan 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
- The owner (or spouse/civil union partner 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.

Mark here ______ if you are a member of an executive board of a unit owner's association, as defined in § 38-33.3-103 of the Colorado Revised Statutes, located within the boundaries of the district for which you are running for office.

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 will not, in my campaign for this office, receive contributions or make expenditures exceeding \$200 in the aggregate during the election cycle, however, if I do so, I will thereafter file all disclosure reports required under the Fair Campaign Practices Act.

DATED thisday of, 20	WITNESSED by the following Colorado registered elector:
(Signature of Candidate)	
	(Signature of Witness)
(Printed Full Name of Candidate)	
	(Printed Full Name of Witness)
(Email Address)	
	(Residence Address) (County) (City/Town, State, Zip Code)
(Telephone Number)	
	(Telephone Number)

For Use by the Designated Election Official:

Received on:		, at:	Received by:		
	(Date)	(Time)		(Name)	
0 1/ 1					
Self-Nomination Form Deemed:					
	Sufficient on:	(Date	e/Time)		
	Not Sufficient on:		didate Notified on:	(Date)	
	Received Amended Form on:		(Date/Time)		
	Amended Form Sufficient on:		(Date/Time)		

County in which the district court that authorized the creation of the special district is located: ______ County.

After review, the DEO shall provide notification of the sufficiency or insufficiency of the candidate; no later than the 67th day prior to the election.

***ATTENTION: DO NOT FILE WITH THE SECRETARY OF STATE IF YOUR ELECTION IS CANCELLED!

Copy sent to Secretary of State on: _____ (Date) [If the election is <u>not</u> cancelled, the self-nomination and acceptance form must be filed with the Secretary of State no later than the 60th day prior to the election, March 3, 2023.].