

**ARABIAN ACRES METROPOLITAN DISTRICT
SELF-NOMINATION AND ACCEPTANCE**

C.R.S 1-13.5-303; 32-1-103(4); 1-45-109(1); 1-45-110; SOS CPF Rule 16; 1-4-908(1), 1-4-912

I, _____
(full name of the candidate as the name will appear on the ballot, cannot use titles such as "MD,"
"Reverend," or "Chief")

who reside at: _____
(residence street name and number)

_____ (mailing address if different from residence address)

Whose email address is: _____
(enter email)

hereby nominate myself and accept such nomination for the office of Director on the Board of Directors of the Arabian Acres Metropolitan District at the special election on September 17, 2019, **and will serve the remainder of the term of office if elected.**

I affirm that I am an eligible elector of the Arabian Acres Metropolitan District and am an eligible elector at the date of signing this Self-Nomination and Acceptance Form.

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; 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 this _____ day of _____, 2019

WITNESSED by the following registered elector:

(Signature of Candidate)

(Signature of Witness)

(Printed Full Name of Candidate)

(Printed Full Name of Witness)

(email address)

(Residence address)

(Telephone Number)

(City or Town, Zip Code)

For Use by the Designated Election Official:

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)

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

Copy sent to Secretary of State on: _____ (Date) [If the election is not 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, September 17, 2019.

LAST DAY TO ACCEPT SELF NOMINATION FORMS IS JULY 15, 2019.

HOWEVER, DUE TO AN ERROR IN THE PREVIOUSLY POSTED SELF NOMINATION FORM, THE LAST DAY TO ACCEPT SELF NOMINATION FORMS WILL BE JULY 31, 2019. IF THE SELF NOMINATION FORM IS SUBMITTED AFTER JULY 15, 2019, THE FORM MUST BE ACCOMPANIED BY A NOTARIZED AFFIDAVIT THAT THE NOMINEE RELIED ON THE PREVIOUS FORMS MISTAKEN DATE AND IS FILING THE FORM LATE BASED ON THIS CIRCUMSTANCE.

PLEASE SEND, VIA EMAIL AND REGULAR DELIVERY, THE ORIGINAL COMPLETED AND SIGNED FORM TO:

Dallas Schroeder

Elbert County Clerk and Recorder

PO Box 990

Kiowa, CO 80117

dallas.schroeder@elbertcounty-co.gov