

Nomination Paper and Candidate's Acceptance

Local Authorities Election Act
(Sections 12, 21, 22, 23, 27, 28, 47,
68.1, 151, Part 5.1)
Education Act (Sections 4(4), 74)

Note: The personal information on this form is being collected to support the administrative requirements of the local authorities election process and is authorized under sections 21 and 27 of the *Local Authorities Election Act* and section 33(c) of the *Freedom of Information and Protection of Privacy Act*. The personal information will be managed in compliance with the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions concerning the collection of this personal information, please contact

FOIP Coordinator

780-624-2574

Title of the Responsible Official

Business Phone Number

LOCAL JURISDICTION: Town of Peace River, PROVINCE OF ALBERTA

We, the undersigned electors of Town of Peace River, nominate
Name of Local Jurisdiction and Ward (if applicable)

SAWCHUK

Candidate Surname

TERRENCE MICHAEL

Given Names

PEACE RIVER AB, T8S as a candidate at the election
Complete Address and postal code

about to be held for the office of COUNCILLOR
Office Nominated for

of Town of Peace River
Name of Local Jurisdiction

Signatures of at least **5 ELECTORS ELIGIBLE TO VOTE** in this election in accordance with sections 27 and 47 of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* (if applicable). If a city or a board of trustees under the *Education Act* passes a bylaw under section 27(2) of the *Local Authorities Election Act*, then the signatures of up to 100 electors eligible to vote may be required.

Printed Name of Elector	Complete Address and Postal Code of Elector	Signature of Elector
Brent Rostad	T8S	
Robin Erickson		
Deborah Duperron	T8S	
Lori Day	T8S	
Guy Milly	T8S	

Candidate's Acceptance

I, the above named candidate, solemnly swear (affirm)

- THAT I am eligible under sections 21 and 47 (and section 12, in the case of summer villages) of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* (if applicable) to be elected to the office;
- THAT I am not otherwise disqualified under section 22 or 23 of the *Local Authorities Election Act*;
- THAT I will accept the office if elected;
- THAT I have read sections 12, 21, 22, 23, 27, 28, 47, 68.1, and 151 and Part 5.1 of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* (if applicable) and understand their contents;
- THAT I am appointing

Name, Contact Information or Complete Address and Postal Code and Telephone Number of Official Agent (if applicable)

as my official agent.

- THAT I will read and abide by the municipality's code of conduct if elected (if applicable); and
- THAT the electors who have signed this nomination paper are eligible to vote in accordance with the *Local Authorities Election Act* and the *Education Act* and resident in the local jurisdiction on the date of signing the nomination.

Print name as it should appear on the ballot

SAWCHUK TERRY
Candidate's Surname Given Names (may include nicknames, but not titles, i.e., Mr., Ms., Dr.)

SWORN (AFFIRMED) before me

at the Town of Peace River,

in the Province of Alberta,

this 21 day of August, 2025.

Candidate's Signature

Signature of Returning Officer or Commissioner for Oaths
or Notary Public in and for Alberta
(Also include printed or stamped name and expiry date)



RETURNING OFFICER'S ACCEPTANCE

Returning Officer signals acceptance by signing this form:

Signature of Returning Officer

**IT IS AN OFFENCE TO SIGN A FALSE AFFIDAVIT OR A FORM THAT
CONTAINS A FALSE STATEMENT**

Candidate Financial Information

Local Authorities Election Act
(Section 27)

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FOIP Coordinator

780-624-2574

Title of the Responsible Official

Business Phone Number

Candidate's Full Name Terrence Sawchuk

Candidate's Address and Postal Code [REDACTED] Peace River, AB
T8S [REDACTED]

Address(es) of Place(s) where Candidate Records are Maintained Same as above

Name(s) and Address(es) of Financial Institutions where Campaign Contributions will be Deposited (if applicable)

CIBC

Name(s) of Signing Authorities for each Depository Listed Above (if applicable)

Terry Sawchuk

Where there is any change in the above mentioned information, the candidate shall notify the local jurisdiction in writing within 48 hours of such changes by submitting a completed information form.



TOWN OF
PEACE RIVER
ALBERTA

Box 6600
Peace River, Alberta T8S 1S4
Telephone (780) 624-2574

TO: TERRY SAWCHUK

Date: 2025-08-21
Initials: TK
Receipt Number: 419929

GST#R108128851

Description	Account Number	Total Due	Payment/Credit	Balance O/S
General Nomination Fees	NOM	\$50.00	\$50.00	\$0.00
		Subtotal:	\$50.00	
		Tax Amount:	\$0.00	

			\$50.00	
			=====	
		Debit:	\$50.00	

		Amount Received:	\$50.00	
		Rounding:	\$0.00	
		Amount Returned:	\$0.00	



Cobourg Police Service

107 King Street West
Cobourg, Ontario
K9A 2M4

Criminal Record and Judicial Matters Check (CRJMC)

Date: 2025-07-22

Request #: 11368221

Applicant Terrence Sawchuk (Sawchuk)

Date of Birth: [REDACTED]

Results for Name-Based Criminal Record Check (CRC): Negative (Cleared)

Results of Investigative Databank and Local Indices Results: Negative (Cleared)

Based solely on the name(s) and date of birth provided, a search of the National Criminal Records repository maintained by the RCMP did not identify any records for a person with the name(s) and date of birth of the applicant. Positive identification that a criminal record may or may not exist at the National Criminal Records repository can only be confirmed by fingerprint comparison. Not all offences are reported to the National Criminal Records repository. A local indices check may or may not reveal criminal record convictions that have not been reported to the National Criminal Records repository.

Please note: this information is provided based on the identification information provided by the applicant. If there is any dispute between the information provided by the applicant, fingerprint comparison may be required, as previously consented in writing by the applicant.

A.M.
Badge #670

To validate the authenticity of this document, visit <https://www.mypolicecheck.com/Validate/PublicChecks> and enter this information:
Confirmation Id: 12392074, Request Id: R164410904

This report has been generated by the Triton Advantage System.
Our phone number and email address 1-844-874-8667 or customerservice@tritoncanada.ca

Triton Services - Criminal Background Check, Resume Verification, Credit Check, Reference Check