## SELF- NOMINATION AND ACCEPTANCE FOR THE

## KITTREDGE SANITATION AND WATER DISTRICT

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

who reside at:	
(residence street name and nu	mber)
(city or town, zip code)	
(county), (state)	
(mailing address if different fr	rom residence address)
whose e-mail address is:	
	the office of Director for a <b>four-year term</b> on the Board of Jefferson County, Colorado, and will serve if elected at the
I affirm that I am an eligible elector of the Kittredge San of signing this Self-Nomination and Acceptance Form (c	itation and Water District and am an eligible elector at the date or letter).
I am an eligible elector because I am registered to vote in	n Colorado and am (mark one):
the boundaries of the District: Spouse's	ner of owner) of taxable real or personal property situated within s or Civil Union Partner's name if property is in Spouse's or
A Person who is obligated to pay taxes District.	s under a contract to purchase taxable property within the
Mark here if you are a member of an executive both the Colorado Revised Statutes, located within the boundary	oard of a unit owner's association, as defined in § 38-33.3-103 of aries of the district for which you are running for office.
the Colorado Revised Statutes, and I will not, in my cam	the Fair Campaign Practices Act as required in § 1-45-110 of paign for this office, receive contributions or make expenditures e, however, if I do so, I will thereafter file all disclosure reports
ATED this, 2023.	WITNESSED by the following registered elector:
(Signature of Candidate)	(Signature of Witness)
(Print Full Name of Candidate)	(Printed Full Name of Witness)
(Telephone Number of Candidate)	(Residence Address of Witness)
	(City/Town, Zip Code, and County)
	(Telephone Number and email address)

## FOR USE BY THE DESIGNATED ELECTION OFFICIAL:

Received on:	(Date), at:	(Time) Receiv	ved by:	_(Name)
Self-Nomination Form Deemed:				
Sufficient on:	(Date/Time)			
Not Sufficient on:	Candidate Notif	ied on:	_(Date)	
Received Amended Form on: _	(Da	te/Time)		
Amended Form Sufficient on: _	(Da	ate/Time)		
County in which the District Court that a	authorized the crea	tion of the Specia	al District is located: Jeff	erson County
Copy sent to Secretary of State on:acceptance form must be filed with the S				