

Nomination
RURAL MUNICIPALITY OF LAKE LENORE NO.399

We the undersigned, being voters of the:

The Rural Municipality of Lake Lenore No. 399
 Division No. 5

nominate Jean Kernaieguen,
(Name)
 of Box 189 St. Brieux Sask S0K 3V0 - SW 1 42 - 20 - W 2,
(Street/road address or legal description of land) to be a candidate at the election

to be held on the 13th day of November , 2024 for the office of:

Reeve: _____ of _____
(Municipality)

Councillor: Rural Municipality of Lake Lenore
(Municipality)
 Division No. 5

Signature *	Name (printed)	Street/Road Address or Legal Description of Land
<u>Gloria L'Hénaff</u>	<u>Gloria L'Hénaff</u>	<u>NE 142^{W2}</u>
<u>Marcel Rohel</u>	<u>MARCEL ROHEL</u>	<u>NW 36 - 42 - 20^{W2}</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

* require at least
 • 25 signatures for a municipality with a population of 20,000 or more (except for Rural Municipalities);
 • 5 signatures for a municipality with a population of less than 20,000 (except for Rural Municipalities); or
 • 2 signatures for Rural Municipalities.

Candidate's Acceptance
RURAL MUNICIPALITY OF LAKE LENORE NO.399

I, Jean Kernalleguen,
(Name as it will appear on the ballot)

a candidate nominated for the office of:

Reeve: The Rural Municipality of Lake Lenore No. 399

Councillor: The Rural Municipality of Lake Lenore No. 399

Division No. 5

declare that:

- 1 I am the full age of 18 years or will attain the full age of 18 years on or before election day;
- 2 I am a Canadian citizen;
- 3 If elected, I will accept the office for which I was nominated; and
- 4 I am not disqualified by *The Local Government Election Act, 2015* or any other Act from holding the office for which I am a candidate

For rural municipalities

- 5 I am eligible to vote in the municipality;
- 6 I am a resident of Saskatchewan;

Candidate's preferred contact information

(Candidates must provide at least one of the following)

Home Phone Number: 306 275-4622

Cell Phone Number: 306 921-4456

Email Address: _____

Other Contact Information: _____

Dated at St. Briceux, this 8 day of October, 20 24.

Jean Kernalleguen
(Signature of Candidate)

Greg Ruff
(Witness)

Shirley Williams
(Witness)