

LOCAL JURISDICTION: **TOWN OF THORSBY, PROVINCE OF ALBERTA**

Candidate's Full Name:
(candidate's surname, given names)

Candidate's Address:
(complete municipal address or legal land description)

Address of place(s) where candidate records are maintained:

Name(s) and address(es) of financial institutions where campaign contributions will be deposited (if applicable):

Name(s) of signing authorities for each deposit listed above (if applicable):

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 CANDIDATE FINANCIAL INFORMATION FORM.