

Appendix C

FORM I (FRONT)

[Clauses 67(3)(a),(b),(c),(d),(g) & (h) and subsections 67(3), (4) & (5) of the Act]
[Subsection 37(1) of the Regulations]

Nomination

We the undersigned, being voters of the:

TOWN of BURSTALL
(Municipality)

Ward/Division No. (If applicable)

nominate Elizabeth McSweyn
(Name)

of 334 Dunning Street to be a candidate at the election
(Street/road address or legal description of land)

to be held on the 8 day of April, 2026 for the office of:
(Complete one)

Mayor/Reeve: of
(Municipality)

Councillor: TOWN of BURSTALL
(Municipality)

Ward/Division No. (If applicable)

Table with 3 columns: Signature, Name (printed), Street/Road Address or Legal Description of Land. Contains 10 rows of handwritten signatures and printed names with addresses.

- 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.

Appendix C

FORM I (FRONT)

[Clauses 67(3)(a),(b),(c),(d),(g) & (h) and subsections 67(3), (4) & (5) of the Act]
[Subsection 37(1) of the Regulations]

Nomination

We the undersigned, being voters of the:

TOWN of BURSTALL
(Municipality)

Ward/Division No. (If applicable)

nominate Elizabeth McSweeney
(Name)

of 334 Dunning Street to be a candidate at the election
(Street/road address or legal description of land)

to be held on the 8 day of April, 2026 for the office of:
(Complete one)

Mayor/Reeve: of
(Municipality)

Councillor: TOWN of BURSTALL
(Municipality)

Ward/Division No. (If applicable)

Table with 3 columns: Signature*, Name (printed), Street/Road Address or Legal Description of Land. Contains handwritten entries for Jason Sedach, Colleen Dillon, and Ron Tysoe.

* 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.

FORM I (BACK)
[Clauses 67(3)(a)(b)(c)(d)(g) & (h) of the Act]
[Subsection 37(1) of the Regulations]

Candidate's Acceptance

I, Elizabeth McSweyn
(Name as it will appear on the ballot)

a(n) Retired / Medical Disabilities
(Occupation)*

a candidate nominated for the office of: (complete as applicable)

Mayor/Reeve: _____ of _____
(Municipality)

Councillor: TOWN of BURSTALL
(Municipality)

Ward/Division No. _____ (If applicable)

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 municipalities - excluding rural municipalities and resort villages

5 I have resided in Saskatchewan for at least six consecutive months immediately preceding the date on which this nomination paper is submitted; and

6 I have resided in the municipality, or on land now in the municipality, for at least three consecutive months immediately preceding the date on which this nomination paper is submitted.

For rural municipalities

5 I am eligible to vote in the municipality;

6 I am a resident of Saskatchewan;

For resort villages only

5 I have resided in Saskatchewan for at least six consecutive months immediately preceding the date on which this nomination paper is submitted; and

6 I: (indicate one of the following)

(a) have resided in the resort village, or land now in that resort village, for three consecutive months immediately preceding the date on which this nomination paper is submitted;

(b) have been the assessed person with respect to property in the resort village, or property now situated in the resort village, pursuant to section 207 of *The Municipalities Act*, for at least three consecutive months immediately preceding the date on which this nomination paper is submitted;

(c) am the spouse of a person mentioned in clause (a) or (b).

Dated at 11:45 am this 4 day of March, 2026


(Signature of Candidate)


(Witness)


(Witness)

*Can be removed from the form, unless otherwise required by bylaw of the municipality pursuant to clause 9.1(2)(c) of the Act

**MUNICIPALITY OF THE TOWN OF BURSTALL
PUBLIC DISCLOSURE STATEMENT
Form 1**

Name: Elizabeth M^cSweyn
 Address: 334 Dunning Street Box 326
Burstall, SK SON OHO

Disclosure of Employer, etc.:

Pursuant to (subclause 116(2)(a)(i) of *The Cities Act*/subclause 142(2)(a)(i) of *The Municipalities Act*/subclause 160(2)(a)(i) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of every employer, person, corporation, organization, association, or other body from which I or someone in my family receives remuneration for services performed as an employee, director, manager, operator, contractor, or agent:

My Name or Name of Family Member	Payee	Nature of Relationship
N/A		

Disclosure of Corporate Interests:

Pursuant to (subclause 116(2)(a)(ii) of *The Cities Act*/subclause 142(2)(a)(ii) of *The Municipalities Act*/subclause 160(2)(a)(ii) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of each corporation in which I or someone in my family has a controlling interest, or of which I or someone in my family is a director or a senior officer:

My Name or Name of Family Member	Name of Corporation
N/A	

Disclosure of Partnerships:

Pursuant to (subclause 116(2)(a)(iii) of *The Cities Act*/subclause 142(2)(a)(iii) of *The Municipalities Act*/subclause 160(2)(a)(iii) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of each partnership or firm of which I or someone in my family is a member:

My Name or Name of Family Member	Name of Partnership or Firm
N/A	

Note:

1. This form must be completed within 30 days of election.
2. This form, when completed, is a public document.
3. The administrator will make amendments to this disclosure in accordance with subsequent declarations filed by the member.
4. The administrator will note the date on which this statement is amended.

Disclosure of Business Arrangements:

Pursuant to (subclause 116(2)(a)(iv) of *The Cities Act*/subclause 142(2)(a)(iv) of *The Municipalities Act*/subclause 160(2)(a)(iv) of *The Northern Municipalities Act, 2010*), I hereby disclose the name of any corporation, enterprise, firm, partnership, organization, association, or body that I or someone in my family directs, manages, operates or is otherwise involved in that:

- (a) transacts business with the municipality;
- (b) the council considers appropriate or necessary to disclose²; or
- (c) is prescribed:

My Name or Name of Family Member	Name of Corporation, Enterprise, Firm, Partnership, Organization, Association, or Body
N/A	

Disclosure of Property Holdings:

Pursuant to (clause 116(2)(b) of *The Cities Act*/clause 142(2)(b) of *The Municipalities Act*/clause 160(2)(b) of *The Northern Municipalities Act, 2010*), I hereby disclose the municipal address or legal description of any property located in the municipality or an adjoining municipality that is owned by:

- (i) me or someone in my family; or
- (ii) a corporation, incorporated or continued pursuant to *The Business Corporations Act* or the *Canada Corporations Act*, of which I or someone in my family is a director or senior officer or in which I or someone in my family has a controlling interest:

Owner(s)	Municipal Address or Legal Description	Municipality
Ron Tysoe	334 Dunning Street	Burstall

Disclosure of Contracts and Agreements:

Pursuant to (clause 116(2)(c) of *The Cities Act*/clause 142(2)(c) of *The Municipalities Act*/clause 160(2)(c) of *The Northern Municipalities Act, 2010*), I hereby disclose the general nature and any material details of any contract or agreement involving me or someone in my family that could reasonably be perceived to be affected by a decision, recommendation or action of the council and to affect my impartiality in the exercise of my office:

My Name or Name of Family Member	General Nature and Any Material Details of Any Contract or Agreement
N/A	

² Described in a municipal policy or bylaw



PIB	CMP PPU 030
PIB	CMP PPU 005

Release of Results of Criminal Record Check

Reference Number
1518 - February

Important Notices

- This information does not constitute a Certified Criminal Record by the RCMP.
- A Certified Criminal Record can only be issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records.
- This information may not contain all criminal record convictions, or convictions and records related to "young persons" pursuant to the *Youth Criminal Justice Act*.
- Motor vehicle records not checked; consult provincial/territorial ministries for driver's abstract.

Applicant Information

Current Legal Surname (required) MCSWEYN		Current Legal Given Names (required) Elizabeth Anne	
Gender <input type="radio"/> Male <input checked="" type="radio"/> Female		Date of Birth (yyyy-mm-dd; required) 1961-11-14	
Current Address (required) 334 Dunning Street	City (required) Burstall	Province SK	Postal Code (A9A 9A9; required) SON 0H0

Criminal Record Check Results

Note: This is not an affirmation of good character

Negative: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records did not identify any records with the name and date of birth of the applicant. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by fingerprint comparison. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.

Incomplete: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records could not be completed. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist requires the applicant to submit fingerprints to the RCMP National Repository of Criminal Records by an authorized police service or accredited private fingerprinting company. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.

Possible Match: Based solely on the name and date of birth provided by the applicant, a search of the RCMP National Repository of Criminal Records has resulted in a possible match to a registered criminal record. All available police records management systems and court records, where applicable were also searched. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by fingerprint comparison. As such, the criminal record information declared by the applicant does not constitute a Certified Criminal Record by the RCMP. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.

Local Conviction not Added to National Repository of Criminal Records: Based solely on the name and date of birth provided and the criminal record information declared by the applicant, there was a criminal conviction registered on the date **below**, but not a sex offender record where a Record Suspension (Pardon) was granted. Delays do exist between a conviction rendered in court and the details being accessible on the RCMP National Repository of Criminal Records.

If "Local Conviction not Added to National Repository of Criminal Records" was selected, please provide the date the criminal conviction was registered on.
(yyyy-mm-dd)

Additional Comments (this field expands)

Received by

Employee Name Karen Wagman, DSA Leader Detachment	HRMIS No. _____	Detachment Stamp or Seal R.C.M.P. 348 East Road Allowance P.O. Box 277 Leader, SK S0N 1H0
Signature 	Date (yyyy-mm-dd) 2026-02-17	



Declaration of Criminal Record

Reference Number

This form must be completed and submitted with RCMP form 6388 - Consent for the Release of Police Information

Applicant

Last Name McSweyn	Given Name 1 Elizabeth	Given Name 2 Anne
Maiden Name or Other Last Name _____	Gender <input type="radio"/> Male <input checked="" type="radio"/> Female	Date of Birth (yyyy-mm-dd) 1961-11-14
Current Address 334 Dunning Street Box 326 Burstall	City Burstall	Province SK
		Postal Code (A9A 9A9) S0N 0H0

Certified Criminal Record

Note: A Certified Criminal Record can only be issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records.

Declaration of Criminal Record

- Does not constitute a Certified Criminal Record by the RCMP.
- May not contain all criminal record convictions.

Declare the following information:

- All convictions for offences under federal law.

Do not declare the following information:

- Absolute Discharges (disclosed for a period of 1 year).
- Conditional Discharges (disclosed for a period of 3 years).
- Any offences while you were a "young person" (12 years old but less than 18 years old), pursuant to the *Youth Criminal Justice Act*.
- Any charges for which you were not convicted, for example, charges that were withdrawn or dismissed.
- Any provincial or municipal offences.
- Any charges dealt with outside of Canada.
- Any charge for which you received a stay of proceedings (disclosed until retention period is met).

Offence	Date of Sentence (yyyy-mm-dd)	Location
D.U.I.	1999-09-02	Slave Lake, AB

Signature

I certify that the information provided is correct to the best of my knowledge.

Signature of Applicant 	Date (yyyy-mm-dd) 2026-02-17
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Received By

Employee Name Karen Wagman	HRMIS _____	Detachment Stamp or Seal R.C.M.P. 348 East Road Allowance P.O. Box 277 Leader, SK S0N 1H0
Signature 	Date (yyyy-mm-dd) 2026-02-17	