

**SELF- NOMINATION AND ACCEPTANCE**

C.R.S 1-13.5-303; 1-45-109(1); 1-45-110; SOS CPF Rule 16

I hereby nominate myself and accept such nomination for the office of Director to serve a (circle one) two-year / four-year term on the Board of Directors of the LOCHBUIE STATION RESIDENTIAL METROPOLITAN DISTRICT, County of Adams (the "District") at the regular election on May 6, 2025, and will serve if elected.

I affirm that I am an eligible elector of the District and am an eligible elector at the date of signing this Self-Nomination and Acceptance Form.

I further affirm that I am familiar with the provisions of the Fair Campaign Practices Act as required in § 1-45-110 of the Colorado Revised Statutes, and I will not, in my campaign for this office, receive contributions or make expenditures exceeding \$200 in the aggregate during the election cycle, however, if I do so, I will thereafter file all disclosure reports required under the Fair Campaign Practices Act.

Mark here \_\_\_\_\_ if you are a member of an executive board of a unit owner's association, as defined in § 38-33.3-103 of the Colorado Revised Statutes, located within the boundaries of the Lochbuie Station Residential Metropolitan District.

Full name of candidate as the name will appear on the ballot: \_\_\_\_\_  
(cannot use titles such as "MD," "Reverend," or "Chief")

**Residential Address**

Street name and number: \_\_\_\_\_

City or town, state, zip code: \_\_\_\_\_

County: \_\_\_\_\_

Email address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Mailing Address**

(if different from residence address)

Street name and number: \_\_\_\_\_

City or town, state, zip code: \_\_\_\_\_

**Eligibility Section**

I am an eligible elector because I am registered to vote in Colorado and am (mark one):

- A resident of the District, or area to be included in the District; or
- The owner (or spouse/civil union partner of owner) of taxable real or personal property situated within the boundaries of the District.  
Spouse's Name, if property is in spouse's name: \_\_\_\_\_
- A person who is obligated to pay taxes under a contract to purchase taxable property within the District.

DATED \_\_\_\_\_, 2025.

Signature of Candidate: \_\_\_\_\_

Printed Full Name: \_\_\_\_\_

**WITNESSED** by the following registered elector:

Signature of Witness: \_\_\_\_\_

Printed Full Name: \_\_\_\_\_

Residence Street Name and Number: \_\_\_\_\_

Residence City/Town and Zip Code: \_\_\_\_\_