



FORM 13 Elector Register

Local Authorities Election Act
(Sections 1(n.1), 47, 49, 53, 54, 59, 77.1, 78)

The personal information collected through this form is for administering the election. This collection is authorized by section 4(c) of the Protection of Privacy Act. For questions about the collection or use of this information, contact the Legislative Service Supervisor at Yellowhead County, 2716-1 Avenue, Edson, AB T7E 1N9 Ph: 780 723 4800.

LOCAL JURISDICTION: Yellowhead County, PROVINCE OF ALBERTA

ELECTION DATE: October 20, 2025

VOTING SUBDIVISION OR WARD (If Applicable) _____ VOTING STATION: _____

STATEMENT OF ELECTOR ELIGIBILITY

I, _____ of _____
(Name of Elector) (Complete address and postal code)

born on _____, am eligible to vote at the above-mentioned election because
(Birth Date)

- I have not voted before in this election;
- I am 18 years of age or older;
- I am a Canadian Citizen;
- My place of residence is in the Voting Subdivision or Ward on Election Day; and
- I have provided the required proof of eligibility as required by Section 53 of the *Local Authorities Election Act* or, if applicable, I have provided identification for inspection and my residence has been vouched for.

Signature of Elector

IT IS AN OFFENCE TO SIGN A FALSE STATEMENT

BALLOTS ISSUED TO ELECTOR

Ballots Issued to Elector: Check (✓) Councillor Mayor

DEPUTY RETURNING OFFICER

Deputy's Initials: _____ Identification Shown: Voter Number: _____

Select one:

The elector is on the permanent electors register for the above-named local jurisdiction
 The elector is NOT on the permanent electors register for the above-named local jurisdiction. Statement of elector eligibility completed.

If the elector is not on the permanent electors register, select one:

Proof of residence shown Elector's residence vouched for

ELECTOR WHO IS UNABLE TO VOTE IN THE USUAL MANNER

Ballot of elector who is unable to vote in the usual manner was marked by another person

Reason: _____