SELF-NOMINATION AND ACCEPTANCE FORM WILDGRASS METROPOLITAN DISTRICT NO. 2, BOULDER COUNTY

Pursuant to §§ 1-13.5-303, 1-4-908, 1-45-110, C.R.S.

,			
	(full name of the candidate as the name will appear on the ballot)		
vho reside at :			
	(residence address, including street number and name)		
	(city or town, zip code)	(county)	
	(full mailing address, if different from residence address)		
	(telephone)	(e-mail)	

hereby nominate myself and accept such nomination for the office of Director for a **term ending May** 2027 on the Board of Directors of the **Wildgrass Metropolitan District** at the election to be conducted on May 3, 2022, and will serve if elected.

I affirm that I am an eligible elector of the District on the date of signing this form. I am an eligible elector because I am registered to vote in the State of Colorado and am *(mark all that apply)*:

a resident of the District.
the owner (or the spouse/civil union partner of the owner) of taxable real or personal property situated within the boundaries of the District.
Name of spouse/civil union partner, if property in his/her name:
a person who is obligated to pay taxes under a contract to purchase taxable property within the District.

I ____ **am** *or* ____ **am not** a member of an executive board of a unit owners' association, as defined in § 38-33.3-103 C.R.S., located within the boundaries of the District for which I am running for office.

I am familiar with the provisions of §§ 1-45-101, *et seq.*, C.R.S. (the "Fair Campaign Practices Act"), andI will not, in my campaign for this office, receive contributions or make expenditures exceeding \$200.00 in the aggregate; however, if I do so, I shall thereafter file all disclosure reports required under said Act.

Printed Name of Candidate	Signature of Candidate	Date
*****	*****	******
INFORMATION PROVIDED F OF COLORADO:	BY A WITNESS WHO IS AN E	ELIGIBLE ELECTOR OF THE STATE
Printed Name of Witness	Signature of Witness	Date
(Witness address, including stree	(Witness county)	
(Witness city or town, zip code)	(Witness telephone)	
For DEO Use Only: Rece Deer State	eived on:, at: ned Sufficient by DEO on: ement of Sufficiency delivered to Candidate	Rec'd by: Client: Ack'd: e on: Ack'd: