

**SELF-NOMINATION AND ACCEPTANCE FOR MAY 2, 2023 REGULAR ELECTION**  
**FOR THE CIMARRON HILLS FIRE PROTECTION DISTRICT**

C.R.S. 1-13.5-303; 1-45-109(1)(a)(II); 1-45-110; SOS CPF Rule 16; 1-4-908(1); 1-4-912

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

\_\_\_\_\_  
Residence Street Address

\_\_\_\_\_  
City or Town, Zip Code

\_\_\_\_\_  
County, State

\_\_\_\_\_  
Mailing Address, if different from residence address

whose email address is: \_\_\_\_\_

**hereby nominate myself and accept such nomination** for the office of Director for a **four (4)** year term on the Board of Directors of the Cimarron Hills Fire Protection District at the regular election on May 2, 2023, **and will serve if elected.**

**I affirm that I am an eligible elector** of the Cimarron Hills Fire Protection District and am an eligible elector at the date of signing this Self-Nomination and Acceptance form.

**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 District for which you are running for office.**

**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.**

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

**WITNESSED** by the following registered elector:

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

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

\_\_\_\_\_  
Printed Full Name of Candidate

\_\_\_\_\_  
Printed Full Name of Witness

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

\_\_\_\_\_  
Residence Address, County, City/Town, Zip Code

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

Received this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

\_\_\_\_\_  
Designated Election Official

**For Use by the Designated Election Official:**

Received on: \_\_\_\_\_, at: \_\_\_\_\_ Received by: \_\_\_\_\_  
(Date) (Time) (Name)

Self-Nomination Form Deemed:

Sufficient on: \_\_\_\_\_ (Date/Time)

Not Sufficient on: \_\_\_\_\_ Candidate Notified on: \_\_\_\_\_ (Date)

Received Amended Form on: \_\_\_\_\_ (Date/Time)

Amended Form Sufficient on: \_\_\_\_\_ (Date/Time)

County in which the district court that authorized the creation of the special district is located: **El Paso County.**

Copy sent to Secretary of State on: \_\_\_\_\_ (Date) [If the election is not cancelled, the self-nomination and acceptance form must be filed with the Secretary of State no later than the 60<sup>th</sup> day prior to the election]

**\*\*\*ATTENTION: DO NOT FILE WITH THE SECRETARY OF STATE IF YOUR ELECTION IS CANCELLED!**