

**FORM K**  
*{Section 75 of the Act}*

**Receipt of Nomination and Candidate's Acceptance**

I acknowledge that I have received a completed nomination paper and candidate's acceptance form

from Audrey Watson \_\_\_\_\_  
*(Name)*


of 614 4<sup>th</sup> Avenue, Rosthern SK S0K 3R0, a candidate for the office of:  
*(street/road address or legal description of land)*

*(complete as applicable)*

**Mayor:** Town of Rosthern

**Councillor:** Town of Rosthern

Dated at Rosthern, SK this 30 day of September, 2024.

  
*(Returning Officer or Nomination Officer)*



**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 Rosthern

nominate Audrey Watson, Retired Businessperson  
(Name) (Occupation)

of 614. 4<sup>th</sup> Ave Rosthern SK,  
(street/road address or legal description of land)

to be a candidate at the election to be held on the 13<sup>th</sup> day of November 2024, for the office of:

*(complete one)*

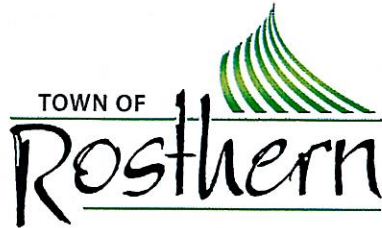
           **Mayor:** Town of Rosthern

or

  ✓   **Councillor:** Town of Rosthern

<u>Signature</u>	<u>Name (printed)</u>	<u>Street/Road Address or Legal Description of Land</u>
	PATRICK MELIN	2004 5 <sup>th</sup> St #14
	Nicole Thiessen	918 5 <sup>th</sup> Ave
	TERRY ETHIER	3005-4 <sup>th</sup> St.
	Linda Rudachyk	2006-11 <sup>th</sup> St
	Don Corbett	10008 5 <sup>th</sup> St.

5 signatures required



**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, Audrey Watson  
*(Name as it will appear on the ballot)*

a(n) retired business person  
*(Occupation)*

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

           **Mayor:** Town of Rosthern

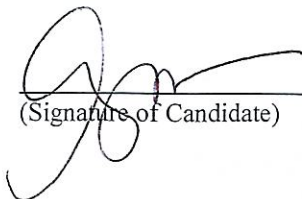
*or*

           **Councillor:** Town of Rosthern

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;
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;
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 Town of Rosthern, or on land now in the Town of Rosthern, for at least three consecutive months immediately preceding the date on which this nomination paper is submitted.

Dated at Rosthern, SK this 30 day of September, 2024.

  
(Signature of Candidate)

  
(Witness)

  
(Witness)



**PUBLIC DISCLOSURE STATEMENT  
Form 1**

Name: Audrey Watson  
 Address: 614 - 4th Ave [REDACTED]  
Rosthern SK S0K 3R0

**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	Payer	Nature of Relationship

**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

**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

**Disclosure of Other Involvements:**

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 disclose; or
- (c) is prescribed:

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

**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

**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

**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 was amended.

DECLARATION

I, Audrey Watson, of the [TOWN OF ROSTHERN], in the Province of Saskatchewan, do hereby declare that to the best of my knowledge, information and belief, the statements and allegations contained and made in this form are true and complete. I make this declaration for the purpose of official registration in the full knowledge that it will be available for public examination.

Dated this 30 day of September, 20 24.

[Signature]  
\_\_\_\_\_  
*Witness*

[Signature]  
\_\_\_\_\_  
*Signature of Declarant*

Date Received: September 30/24

FORM B.1  
[Clause 6.1(1)(a)]

**RESULTS OF CRIMINAL RECORD  
CHECK FOR CANDIDATE FOR ELECTION**

NAME OF CANDIDATE: Watson Audrey Rose  
Last Name Given Name Middle Name

PREVIOUS NAME and/or ANY OTHER NAMES USED: Audrey Rose Matsalla

ADDRESS: 614 4th Ave [REDACTED]  
Apt.# Street/Avenue

Rosthern SASK S0K 3R0 [REDACTED]  
City/Town Province/Postal Code Telephone Number

DATE OF BIRTH: [REDACTED] [REDACTED] [REDACTED] PLACE OF BIRTH: [REDACTED]  
Year/Month/Day

GENDER: Male /  Female

MUNICIPALITY: Rosthern Town of Rosthern SK  
(town, northern village, northern hamlet) (name of municipality)

NAME OF LOCAL POLICE SERVICE THAT CONDUCTED CHECK: Rosthern RCMP

CRIMINAL RECORD CHECK ATTACHED:  Yes / No

*Note: The criminal record check from the local police service must be attached to this form to be acceptable for submission with the nomination paper and must have been completed not more than 30 days before the date of submission.*

**STATEMENT OF CONSENT:**  
 I consented to a search of all records available at the time the search was conducted, including charges before the courts (including active alternative measures, stays of proceedings entered within one year of this request and findings of unfit to stand trial), findings of guilt or convictions (including youth records accessible under subsection 119(2) of the Youth Criminal Justice Act) and court orders (including peace bonds, restraining orders and recognizances under sections 810.01, 810.1 or 810.2 of the Criminal Code) registered in my name in the National Repository and local records available to the police service. I understand that if a possible record existed, it would not be disclosed until identification was confirmed by either myself or by fingerprints. I also understand that apprehensions, orders or other records relating to The Mental Health Services Act or The Youth Drug Detoxification and Stabilization Act were not disclosed.

I understand criminal record checks submitted pursuant to section 89.1 of The Municipalities Act:

- are not considered to be for a volunteer position;
- are not considered to be for a position with the vulnerable sector;
- do not require fingerprint verification for the sake of submission with the nomination paper and it was my option to submit a fingerprint verification to confirm my identity and record or lack of a record;
- do not require a release of information to a third party because I received the results personally; and
- are not required to include copies of the records themselves.

Dated this 26 day of September 2024. Signature: [Signature]



PIB	CMP PPU 030
PIB	CMP PPU 005

## Release of Results of Criminal Record Check

Reference Number

### 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) WATSON	Current Legal Given Names (required) Audrey		
Gender <input type="radio"/> Male <input checked="" type="radio"/> Female	Date of Birth (yyyy-mm-dd; required) [REDACTED]		
Current Address (required) [REDACTED]	City (required) Rosthern	Province SK	Postal Code (A9A 9A9; required) S0K 3R0

### 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)

Vulnerable Sector checks can only be completed on individuals 18yrs of age and older.

### Received by

Employee Name Colleen HUNTER	C.HUNTER ROSTHERN RCMP	HRMIS No. 000189676	Detachment Stamp or Seal ROSTHERN RCMP P.O. BOX 969 ROSTHERN, SK S0K 3R0
Signature 	Date (yyyy-mm-dd) 24/09/26		