SELF-NOMINATION AND ACCEPTANCE FOR MAY 6, 2025 REGULAR ELECTION FOR THE BENNETT NORTH METROPOLITAN DISTRICT NO. 4

,, who reside	de at:
(full name of candidate as the name will appear on the ballot)	
Residence Street Address	
City or Town, Zip Code	
County	
hereby nominate myself and accept such nomination for the Metropolitan District No. 4, Town of Bennett, County of serve if elected at the regular election to be conducted on	Adams, Colorado, for a four (4) year term and will
I affirm that I am an eligible elector of the Benne signing this Self-Nomination and Acceptance form.	ett North Metropolitan District No. 4 at the date of
	n Executive Board of a unit owners association 103, C.R.S., located within the boundaries of the District ning for office.
Section 1-45-110, C.R.S., and I will not, in my campaign	
Signature of Candidate	Printed Full Name
Mailing Address (if different)	Telephone Number
City or Town, Zip Code	Email Address
WITNESSED by the following registered electo	r of the State:
Signature of Witness	Printed Full Name
Residence Street Address	Telephone Number
City or Town, Zip Code	Email Address
County Received this day of , 2025.	

Designated Election Official