SELF-NOMINATION AND ACCEPTANCE

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

who reside at: (Residence Street Name and Number) (City or Town, Zip Code) (County, State) (Mailing Address, if different from residence address)	
(City or Town, Zip Code) (County, State)	
(County, State)	
(Mailing Address if different from residence address)	
(Mailing Address, if different from residence address)	
whose email address is:	
(Email Address)	
hereby nominate myself and accept such nomination	for the office of Director of the Vail Square
Metropolitan District No. 2, Town of Vail, Eagle County, C	Colorado, for a four- year term on the Board
Directors of the District at the regular election on May 6,	2025, and will serve if elected.
I affirm that I am an eligible elector of the Vail Square	
elector at the date of signing this Self-Nomination and Ac	ceptance Form (or letter).
office, receive contributions or make expenditures exelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act.	cceeding \$200 in the aggregate during the all disclosure reports required under the
office, receive contributions or make expenditures exelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act.	cceeding \$200 in the aggregate during the
office, receive contributions or make expenditures exelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act. DATED thisday of, 2025.	cceeding \$200 in the aggregate during the all disclosure reports required under the
office, receive contributions or make expenditures expelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act. DATED thisday of, 2025. (Signature of Candidate)	cceeding \$200 in the aggregate during the all disclosure reports required under the witnessed by the following registered ele
office, receive contributions or make expenditures exelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act. DATED thisday of, 2025. (Signature of Candidate) (Printed Full Name of Candidate)	cceeding \$200 in the aggregate during the all disclosure reports required under the WITNESSED by the following registered ele (Signature of Witness)
required in § 1- 45-110 of the Colorado Revised Statu office, receive contributions or make expenditures expelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act. DATED thisday of, 2025. (Signature of Candidate) (Printed Full Name of Candidate) (Email Address)	with each seeding \$200 in the aggregate during the all disclosure reports required under the with with with the
office, receive contributions or make expenditures expelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act. DATED this day of, 2025. (Signature of Candidate) (Printed Full Name of Candidate) (Email Address) (Telephone Number)	(Signature of Witness) (Residence Address) (County) (City/Town, State, Zip C
office, receive contributions or make expenditures expelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act. DATED this day of, 2025. (Signature of Candidate) (Printed Full Name of Candidate) (Email Address) (Telephone Number) ibility Section (not required, but helpful for DEO to expedit	(Ceeding \$200 in the aggregate during the all disclosure reports required under the all disclosure reports required under the WITNESSED by the following registered ele (Signature of Witness) (Printed Full Name of Witness) (Residence Address) (County) (City/Town, State, Zip County)
office, receive contributions or make expenditures expelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act. DATED thisday of, 2025. (Signature of Candidate) (Printed Full Name of Candidate) (Email Address) (Telephone Number) ibility Section (not required, but helpful for DEO to expedit an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and an eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in Colorado and eligible elector because I am registered to vote in	(Ceeding \$200 in the aggregate during the all disclosure reports required under the all disclosure reports required under the WITNESSED by the following registered ele (Signature of Witness) (Printed Full Name of Witness) (Residence Address) (County) (City/Town, State, Zip County)
office, receive contributions or make expenditures expelection cycle, however, if I do so, I will thereafter file Fair Campaign Practices Act. DATED thisday of, 2025. (Signature of Candidate) (Printed Full Name of Candidate) (Email Address) (Telephone Number) ibility Section (not required, but helpful for DEO to expedit an eligible elector because I am registered to vote in Colorado and an	(Ceeding \$200 in the aggregate during the all disclosure reports required under the all disclosure reports required under the WITNESSED by the following registered ele (Signature of Witness) (Printed Full Name of Witness) (Residence Address) (County) (City/Town, State, Zip County) (Telephone Number) (Printed Full Name of Witness)

For Use by the Designated Election Official:

Received on:(Date)	, at: Received by:		
(Date)	(Time)	(Name)	
Self-Nomination Form Deemed:			
0 15 1	(D.). (T'		
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:County.			
After review, the DEO shall provide notification of the sufficiency or insufficiency of the candidate; no later than the 67 th day prior to the election.			
***ATTENTION: DO NOT FILE WITH THE SECRETARY OF STATE IF YOUR ELECTION IS CANCELLED!			
Copy sent to Secretary of State on: (Date) [If the election is <u>not</u> cancelled, the self-nomination and acceptance form must be filed with the Secretary of State no later than the 60 th day prior to the election, March 7, 2025.].			