<u>SELF-NOMINATION AND ACCEPTANCE FOR MAY 6, 2025 REGULAR ELECTION</u> <u>FOR THE CIMARRON METROPOLITAN DISTRICT</u>

I, wi	ho reside at:
I,, WI, WI, WI, WI, WI, WI	
Residence Street Address	
City or Town, Zip Code	
County	
hereby nominate myself and accept such nomination of the second s	on for the office of Director of the Cimarron Metropolitan District, m and will serve if elected at the regular election to be conducted
on May 6, 2025.	
I affirm that I am an eligible elector of the Nomination and Acceptance form.	Cimarron Metropolitan District at the date of signing this Self-
	er of an Executive Board of a unit owners association 8-33.3-103, C.R.S., located within the boundaries of the District are running for office.
Section 1-45-110, C.R.S., and I will not, in my car	provisions of the Fair Campaign Practices Act as required in mpaign for this office, receive contributions or make expenditures egate during the election cycle, however, if I do so, I will thereafter ler the Fair Campaign Practices Act.
DATED this day of	, 2025.
Signature of Candidate	Printed Full Name
Mailing Address (if different)	Telephone Number
City or Town, Zip Code	Email Address
WITNESSED by the following registered	elector of the State:
Signature of Witness	Printed Full Name
Residence Street Address	Telephone Number
City or Town, Zip Code	Email Address
County	
Received thisday of, 2	2025.
	Designated Election Official