



Form 26 Campaign Disclosure Statement and Financial Statement

Local Authorities Election Act (Sections 147.3, 147.4)

The personal information collected through this form is for administering the election. This collection is authorized by section 4(c) of the Protection of Privacy Act. For questions about the collection of personal information, contact the City Clerk Department.

ATI Coordinator		403-529-8221	
Business Title/Organization		Business Phone Number	
580 1 Street SE	Medicine Hat	Alberta	T1A 8E6
Address	City or Town	Province	Postal Code

LOCAL JURISDICTION: Medicine Hat., PROVINCE OF ALBERTA

Calendar year of disclosure: 2025

Full Name of Candidate: Mark Douglas Albrecht.

Candidate's Mailing Address: Medicine Hat, Alberta., Alberta

Postal Code: _____

This form, including any contributor information from line 2, is a public document.

Campaign Revenue for Calendar Year

CAMPAIGN CONTRIBUTIONS:

1. Total amount of contributions of \$50.00 or less 0

2. Total amount of all contributions of \$50.01 and greater, together with the contributor's name and address (attach listing and amount) 1200.00

NOTE: For lines 1 and 2, include all money and valued personal property, real property or service contributions.

3. Deduct total amount of contributions returned 0

4. NET CONTRIBUTIONS (line 1 + 2 - 3) 1200.00

OTHER SOURCES:

5. Total amount contributed out of candidate's own funds 1639.67.

6. Total net amount received from fund-raising functions 0

7. Transfer of any surplus or deficit from a candidate's previous election campaign 0

8. Total amount of other revenue 0

9. TOTAL OTHER SOURCES (add lines 5, 6, 7 and 8) 1639.67.

TOTAL REVENUE

10. Total campaign revenue for calendar year (add lines 4 and 9) 2839.67.

Campaign Expenditures for Calendar Year

11. Total paid campaign expenses 2839.67.

12. Total unpaid campaign expenses 0

13. Total campaign expenses (add lines 11 and 12) 2839.67.

The candidate must attach an itemized expense report to this form.

Campaign Surplus (Deficit) for Calendar Year (deduct line 13 from line 10) 0

A candidate who has incurred campaign expenses or received contributions of \$50 000 or more must attach a review engagement statement to this form.

ATTESTATION OF CANDIDATE

I certify that to the best of my knowledge this document and all attachments accurately reflect the information required under section 147.4 of the *Local Authorities Election Act*.

2026/01/28

Date yyyy-mm-dd

Signature of Candidate

CAMPAIGN DISCLOSURE CONTRIBUTORS NAME
& ADDRESS FOR MARK ALBRECHT 2025

DEXTER MURSCHELL

AMOUNT.

\$400.00 CASH

MEDICINE HAT, AB

TARA L SCHAFER PROFESSIONAL CORP.

\$300.00 E-transf

MEDICINE HAT, AB

LYLE ALBRECHT.

\$200.00 Cheque

MEDICINE HAT, AB60.

RUSTIC KITCHEN & BAR LTD.

\$200.00 Cheque

MEDICINE HAT, AB

REN SCHINDLE

\$100.00 CASH.

MEDICINE HAT, AB



Minuteman Press
857B 16th Street S.W.
Medicine Hat, AB. • T1A 4X4
Phone: 529-0007 • Fax: 529-0020
mh.admin@minutemanpress.com
www.mh.minutemanpress.com

INVOICE

Invoice Number 21688
Invoice Date 2025-09-19

Bill to: Mark Albrecht
Medicine Hat, AB

Ship to: Mark Albrecht
Medicine Hat, AB



THE NEW HOME OF
COPYWORKS

- DESIGN
- PRINTING
- SIGNAGE
- MARKETING
- DIRECT MAIL
- PROMOTIONAL ITEMS

2,000 Brochures - Albrecht (Job 38621)

\$730.65

Invoice Subtotal: \$730.65
 Goods & Service/08: \$36.53
 Invoice Total: \$767.18
Balance Due: \$767.18

Terms: Net 30 Days

2.0000% interest per month on past-due invoices.

Please pay from this invoice. No statements will be sent.

Thank you for your order! We appreciate your business.



Minuteman Press
857B 16th Street S.W.
Medicine Hat, AB. • T1A 4X4
Phone: 529-0007 • Fax: 529-0020
mh.admin@minutemanpress.com
www.mh.minutemanpress.com

INVOICE

Invoice Number 21711
Invoice Date 2025-09-22

Bill to: Mark Albrecht
Medicine Hat, AB

Ship to: Mark Albrecht
Medicine Hat, AB



THE NEW HOME OF
COPYWORKS



200 Coroplast Signs w/Stakes (Job 38650)

\$1,590.00

Invoice Subtotal: \$1,590.00
Goods & Service/08: \$79.50
Invoice Total: \$1,669.50

Please pay from this invoice. No statements will be sent.
Thank you for your order! We appreciate your business.



Minuteman Press
 857B 16th Street S.W.
 Medicine Hat, AB. • T1A 4X4
 Phone: 529-0007 • Fax: 529-0020
 mh.admin@minutemanpress.com
 www.mh.minutemanpress.com

INVOICE

Invoice Number 21807
 Invoice Date 2025-10-04

Bill to: Mark Albrecht
 Medicine Hat, AB

Ship to: Mark Albrecht
 Medicine Hat, AB



1,000 Brochures (Job 38785)

\$383.80

Invoice Subtotal: \$383.80
 Goods & Service/08: \$19.19
 Invoice Total: \$402.99

Please pay from this invoice. No statements will be sent.
Thank you for your order! We appreciate your business.