

Guide for completing the application for authorization of a private intervenor **Group**

A private intervenor - group that applies for authorization must, in particular, provide the returning officer of its municipality with the information stipulated in section 512.3.

Section 1: IDENTIFICATION AND APPLICATION FOR AUTHORIZATION

A: Group

Enter the name of the group, the date it was created, the address and telephone number.

B: Main leaders of the group

Enter the surname and given name of the main leaders of the group, their domiciliary address as well as their telephone number. If you have more than 5 leaders, please append a schedule providing the same information.

C: Members of the group

Please indicate the actual or approximate number of members of the group.

D: Representative of the group (elector)

Enter your surname and given name, your date of birth, your domiciliary address as well as your telephone number.

E: Purpose of the application (specify the matter of public interest, where applicable)

Indicate the purpose of the application for authorization either by marking the box "Advocate abstention or the spoiling of ballots" or by marking the box "Make known one's views on a matter of public interest", in this case, you must specify the matter.

Section 2: STATEMENT UNDER OATH OF THE REPRESENTATIVE OF THE GROUP

This section specifies the requirements of the Act, the oath and the commitment on the part of the elector.

This section must be signed by the representative of the group and countersigned by a person who is authorized to administer oaths, for example a lawyer, a notary, a judge, a mayor or a commissioner of oaths.

Section 3: ATTESTATION OF THE APPLICATION FOR AUTHORIZATION

Leave this section blank. It is reserved for the returning officer of your municipality. Make careful note of the authorization number that will be assigned to you (MUN-00) as this number must appear on all your publicity.



Application for authorization of a private intervenor **Group**

Group:		Year Month Day
Name of the	he group	Date it was created
Addr	ess	() - Telephone number
Main leaders of the group:		
Surname and given name	Domiciliary address	Telephone number
·		
Actual or approximate number of members	s of the group:	
	s of the group:	
Actual or approximate number of members Representative of the group (elector):	s of the group:	Year Month Day
		Year Month Day
Representative of the group (elector):		
Representative of the group (elector):	entative of the group in capital letters	
Representative of the group (elector): Surname and given name of the representative of the group (elector):	entative of the group in capital letters v address	Date of birth
Representative of the group (elector): Surname and given name of the representation possible properties. Domiciliary	entative of the group in capital letters v address	Date of birth
Representative of the group (elector): Surname and given name of the representative of the group (elector):	entative of the group in capital letters v address n: pallots OR	Date of birth () - Telephone number
Representative of the group (elector): Surname and given name of the representation Domiciliary Purpose of the application for authorization 1° Advocate abstention of the spoiling of th	entative of the group in capital letters v address n: pallots OR	Date of birth
Representative of the group (elector): Surname and given name of the representation Domiciliary Purpose of the application for authorization 1° Advocate abstention of the spoiling of th	entative of the group in capital letters v address n: pallots OR	Date of birth () - Telephone number

A.	For the election of					
	I state that:					
	- I representName of the group					
	- I am a qualified elector and the majority of the members of this group are electors in the municipality					
	OfName of the municipality	;				
	- I do not intend to directly promote or oppose a candidate or a party;					
	- I am not a member of any party;					
	- I am not acting, directly or indirectly, on behalf of a candidate or party;					
	 To my knowledge, no member of the group has obtained an authorization as a private intervenor for a similar purpose or has made an application for authorization that is still pending; 					
	- Between January 1st of an election year to the publication of the notice of election:					
	☐ No publicity expense was incurred and no amount of \$100 or more was given to me;					
	 All the publicity expenses related to the present election are detailed on Schedule A (DGE-1039) of this application for authorization; 					
	☐ The name and address of all persons who have given me an amount of \$100 or more as well as the amount of the sum provided are recorded on Schedule A (DGE-1039) of this application for authorization.					
	I undertake to comply with the provisions of the Act that are applicable to me, in particular, to not exceed the amou of \$300 in publicity expenses (s. 453 (9))					
	Signature of the representative of the group					
Sta	ated under oath before me					
at		. on				
	Name of the municipality	Date				
	Person authorized to administer oaths					
	estation of the application for authorization _ ot this application for authorization for the period that will	Fourthis numbers I am assists				
on	Date of the election	For this purpose, I am assigning the following authorization number:				
		number.				
	Signature of the returning officer	Bate				
	Signature of the returning officer	Sato				

- 1. Send the original to the Chief Electoral Officer of Québec.
- 2. 3. Give a photocopy to the representative of the group identified in section 1 and the returning officer.
- Keep a photocopy for your records.



Schedule to the Application for Authorization of a Private Intervenor Schedule A

Name of the private intervenor	Municipality	Date of the election
		year month day
DETAILED STATEM	IENT OF PUBLICITY EXPENSES (s. 51	2.4.1 of the AERM)
Supplier's name	Supplier's address	Amount (\$)
NAME AND ADDRESS OF T	HE PERSONS HAVING PROVIDED A	SUM OF \$100 OR MORE
NAME AND ADDRESS OF T Surname and given name	HE PERSONS HAVING PROVIDED A S	SUM OF \$100 OR MORE Amount (\$)